

# FINAL REGULATIONS

For information concerning Final Regulations, see Information Page.

## Symbol Key

Roman type indicates existing text of regulations. *Italic type* indicates new text. Language which has been stricken indicates text to be deleted. [Bracketed language] indicates a change from the proposed text of the regulation.

## TITLE 22. SOCIAL SERVICES

### CHILD DAY-CARE COUNCIL

Title of Regulation: **22 VAC 15-30. Standards for Licensed Child Day Centers (amending 22 VAC 15-30-10, 22 VAC 15-30-30, 22 VAC 15-30-50, 22 VAC 15-30-70, 22 VAC 15-30-80, 22 VAC 15-30-90, 22 VAC 15-30-110, [ 22 VAC 15-30-140, ] 22 VAC 15-30-150, 22 VAC 15-30-160, 22 VAC 15-30-180, [ 22 VAC 15-30-190, ] 22 VAC 15-30-200, 22 VAC 15-30-230, 22 VAC 15-30-250, 22 VAC 15-30-260, 22 VAC 15-30-290, 22 VAC 15-30-310 through 22 VAC 15-30-390, 22 VAC 15-30-410, 22 VAC 15-30-430, 22 VAC 15-30-440, 22 VAC 15-30-451, 22 VAC 15-30-461, 22 VAC 15-30-471, 22 VAC 15-30-490, 22 VAC 15-30-500, 22 VAC 15-30-510, 22 VAC 15-30-520, and 22 VAC 15-30-540 through 22 VAC 15-30-670; adding 22 VAC 15-30-585).**

Statutory Authority: §§ 63.2-1734 and 63.2-1735 of the Code of Virginia.

Effective Date: June 1, 2005.

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#### Summary:

*The amendments result from a comprehensive review of the regulations and make numerous changes that include (i) increasing the staff-to-child ratios; (ii) establishing maximum group sizes; (iii) changing procedural measures to improve child supervision; (iv) providing flexibility to meet staff qualifications; (v) expanding the scope and hours of training; (vi) increasing the activity space and resilient surfacing under playground equipment; and (vii) updating several other facility standards.*

*Changes since the proposed were made in the following areas: training and qualifications for program directors, program leaders and general staff; activity space for children; resilient surfacing; staff-to-child ratios; and transportation.*

Summary of Public Comments and Agency's Response: A summary of comments made by the public and the agency's response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

## CHAPTER 30.

### MINIMUM STANDARDS FOR LICENSED CHILD DAY CENTERS.

#### PART I.

#### INTRODUCTION.

#### **22 VAC 15-30-10. Definitions.**

The following words and terms when used in this chapter shall have the following meanings, unless the context clearly indicates otherwise:

"Adult" means any individual 18 years of age or older.

"Age and stage appropriate" means the curriculum, environment, equipment, and adult-child interactions are suitable for the ages of the children within a group and the individual needs of any child.

"Age groups":

1. "Infant" means children from birth to 16 months.
2. "Toddler" means children from 16 months up to two years.
3. "Preschool" means children from two years up to the age of eligibility to attend public school, five years by September 30.
4. "School age" means children eligible to attend public school, age five or older by September 30 of that same year. Four- or five-year-old children included in a group of school-age children may be considered school age during the summer months if the children will be entering kindergarten that year.

"Attendance" means the actual presence of an enrolled child.

"Balanced mixed-age grouping" means a program [ *using a curriculum designed to meet the needs and interests of children in the group and is* ] planned for [ *children who enter the program at* ] three [ - ] through five [ ~~year-old children~~ ] years of age. *The enrollment in the balance mixed-age grouping comprises a relatively even allocation of children* in [ ~~which the enrollment in the group is comprised of 1/3 of~~ ] each of three ages [ *(three to six years)* ] and is designed for children and staff to remain together with turnover planned only for the replacement of [ ~~graduating older children with incoming younger children exiting students with children of ages that maintain the class balance~~ ].

"Body fluids" means urine, feces, saliva, blood, nasal discharge, eye discharge, and injury or tissue discharge.

"Camp" means a child day camp *that is a child day center for school age children that operates during the summer vacation months only. Four-year-old children who will be five by September 30 of the same year may be included in a camp for school age children.*

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"Center" means a child day center.

"Child" means any individual under 18 years of age.

~~"Child day camp" means a child day center for school-age children that operates during the summer vacation months only. Four year old children who will be five by September 30 of that same year may be included in a camp for school-age children.~~

"Child day center" means a child day program offered to (i) two or more children under the age of 13 in a facility that is not the residence of the provider or of any of the children in care or (ii) 13 or more children at any location.

Exemptions (§ 63.2-1715 of the Code of Virginia):

1. A child day center that has obtained an exemption pursuant to § 63.2-1716 of the Code of Virginia;
2. A program where, by written policy given to and signed by a parent or guardian, children are free to enter and leave the premises without permission or supervision. A program that would qualify for this exemption except that it assumes responsibility for the supervision, protection and well-being of several children with disabilities who are mainstreamed shall not be subject to licensure;
3. A program of instructional experience in a single focus, such as, but not limited to, computer science, archaeology, sport clinics, or music, if children under the age of six do not attend at all and if no child is allowed to attend for more than 25 days in any three-month period commencing with enrollment. This exemption does not apply if children merely change their enrollment to a different focus area at a site offering a variety of activities and such children's attendance exceeds 25 days in a three-month period;
4. Programs of instructional or recreational activities wherein no child under age six attends for more than six hours weekly with no class or activity period to exceed 1-1/2 hours, and no child six years of age or above attends for more than six hours weekly when school is in session or 12 hours weekly when school is not in session. Competition, performances and exhibitions related to the instructional or recreational activity shall be excluded when determining the hours of program operation;
5. A program that operates no more than a total of 20 program days in the course of a calendar year provided that programs serving children under age six operate no more than two consecutive weeks without a break of at least a week;
6. Instructional programs offered by public and private schools that satisfy compulsory attendance laws or the Individuals with Disabilities Education Act, *as amended* (20 USC § [4470 1400] et seq.), and programs of school-sponsored extracurricular activities that are focused on single interests such as, but not limited to, music, sports, drama, civic service, or foreign language;
7. Education and care programs provided by public schools ~~which that~~ are not exempt pursuant to subdivision 6 of this definition shall be regulated by the State Board of Education using regulations that incorporate, but may

exceed, the regulations for child day centers licensed by the commissioner;

8. Early intervention programs for children eligible under Part H C of the Individuals with Disabilities Education Act, *as amended* (20 USC § 1470 1400 et seq.), wherein no child attends for more than a total of six hours per week;

9. Practice or competition in organized competitive sports leagues;

10. Programs of religious instruction, such as Sunday schools, vacation Bible schools, and Bar Mitzvah or Bat Mitzvah classes, and child-minding services provided to allow parents or guardians who are on site to attend religious worship or instructional services;

11. Child-minding services which are not available for more than three hours per day for any individual child offered on site in commercial or recreational establishments if the parent or guardian (i) is not an on-duty employee, except for part-time employees working less than two hours per day; (ii) can be contacted and can resume responsibility for the child's supervision within 30 minutes; and (iii) is receiving or providing services or participating in activities offered by the establishment;

12. A certified preschool or nursery school program operated by a private school ~~which that~~ is accredited by a statewide accrediting organization recognized by the State Board of Education or accredited by the National Association for the Education of Young Children's National Academy of Early Childhood Programs; the Association of Christian Schools International; *the American Association of Christian Schools*; the National Early Childhood Program Accreditation; the National Accreditation Council for Early Childhood Professional Personnel and Programs; the International Academy for Private Education; ~~Standards for the American Montessori Society Accreditation~~; the International Accreditation and Certification of Childhood Educators, Programs, and Trainers; or the National Accreditation Commission ~~and which that~~ complies with the provisions of § 63.2-1717 of the Code of Virginia; or

13. By policy, a child day center that is required to be programmatically licensed by another state agency for that service.

"Child day program" means a regularly operating service arrangement for children where, during the absence of a parent or guardian, a person or organization has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of 13 for less than a 24-hour period.

Note: This does not include programs such as drop-in playgrounds or clubs for children when there is no service arrangement with the child's parent.

~~"Children with disabilities special needs" means those children evaluated as having autism, deaf-blindness, a developmental delay, a hearing impairment which may include deafness, mental retardation, multiple disabilities, an orthopedic impairment, a serious emotional disturbance, a severe or profound disability, a specific learning disorder, a~~

~~speech or language impairment, a traumatic brain injury, or a visual impairment which may include blindness with developmental disabilities, mental retardation, emotional disturbance, sensory or motor impairment, or significant chronic illness who require special health surveillance or specialized programs, interventions, technologies, or facilities.~~

*"Cleaned" means treated in such a way to reduce the amount of filth through the use of water with soap or detergent or the use of an abrasive cleaner on inanimate surfaces.*

~~"Commissioner" means the Commissioner of Social Services, also known as the Director of the Virginia Department of Social Services.~~

*"Communicable disease" means a disease caused by a microorganism (bacterium, virus, fungus, or parasite) that can be transmitted from person to person via an infected body fluid or respiratory spray, with or without an intermediary agent (such as a louse, mosquito) or environmental object (such as a table surface). Some communicable diseases are reportable to the local health authority.*

~~"Department" means the Virginia Department of Social Services.~~

~~"Department's representative" means an employee or designee of the Virginia Department of Social Services, acting as the authorized agent of the commissioner.~~

~~"Evening care" means care provided in a center after 7 p.m. but not through the night.~~

*"Good character and reputation" means knowledgeable and objective people agree that the individual (i) maintains business, professional, family, and community relationships which are characterized by honesty, fairness, and truthfulness and (ii) demonstrates a concern for the well-being of others to the extent that the individual is considered suitable to be entrusted with the care, guidance, and protection of children. Relatives by blood or marriage and people who are not knowledgeable of the individual, such as recent acquaintances, shall not be considered objective references.*

*"Group of children" means the children assigned to a staff member or team of staff members [occupying an individual classroom or well-defined space within a larger room].*

*"High school program completion or the equivalent" means an individual has earned a high school diploma or General Education Development (G.E.D.) certificate, or has completed a program of home instruction equivalent to high school completion.*

~~"Independent contractor" means an individual who entity that enters into an agreement to provide specialized services or staff for a specified period of time.~~

*"Individual service, education or treatment plan" means a plan identifying the child's strengths, needs, general functioning and plan for providing services to the child. The service plan includes specific goals and objectives for services, accommodations and intervention strategies. The service, education or treatment plan clearly shows documentation and reassessment/evaluation strategies.*

*"Intervention strategies" means a plan for staff action that outlines methods, techniques, cues, programs, or tasks that enable the child to successfully complete a specific goal.*

*"Licensee" means any individual, partnership, association, public agency, or corporation to whom the license is issued.*

~~"Minor injury" means a wound or other specific damage to the body such as, but not limited to, a small scratch, cut or scrape, minor bruise or discoloration of the skin abrasions, splinters, bites that do not break [skins the skin], and bruises.~~

*"Overnight care" means care provided after 7 p.m. and through the night.*

*"Parent" means the biological or adoptive parent or parents or legal guardian or guardians of a child enrolled in or in the process of being admitted to a center.*

*"Physician" means an individual licensed to practice medicine in any of the 50 states or the District of Columbia.*

*"Physician's designee" means a physician, licensed nurse practitioner, licensed physician assistant, licensed nurse (R.N. or L.P.N.), or health assistant acting under the supervision of a physician.*

*"Primitive camp" means a camp where places of abode, water supply system, or permanent toilet and cooking facilities are not usually provided.*

~~"Programmatic experience in the group care of children" means time spent working directly with children in a group, in a child day center or family day home regulated by the state Department of Social Services, the state Department of Mental Health, Mental Retardation and Substance Abuse Services, or the state Department of Education; provided that "regulated" shall specifically include, without limitation, day care centers qualifying for exemption from licensure under ss 63.2-1716 and 63.2-1717 of the Code of Virginia that is located away from the child's home. Work time shall be computed on the basis of full-time work experience during the period prescribed or equivalent work time over a longer period. Experience settings may include but not be limited to a child day program, family day home, child day center, boys and girls club, field placement, elementary school [, ] or a faith-based organization.~~

*"Resilient surfacing" means:*

- (i) 1. For [indoor and] outdoor use underneath and surrounding equipment [, ] ~~mats manufactured for such use that meet the guidelines of the Consumer Product Safety Commission and the standards of the American Society for Testing Materials or at least six inches of materials, such as, but not limited to, loose sand, wood chips, wood mulch, or pea gravel [ ; impact absorbing surfacing materials that comply with minimum safety standards when tested in accordance with the procedures described in the American Society for Testing and Materials' standard F1292-99 as shown in Figures 2 (Compressed Loose Fill Synthetic Materials Depth Chart) and 3 (Use Zones for Equipment) on pages 6-7 of the National Program for Playground Safety's "Selecting~~

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*Playground Surface Materials: Selecting the Best Surface Material for Your Playground," February 2004. ]*

~~[ a. At least nine inches of loose fill, impact absorbing surfacing material such as wood chips, double shredded bark mulch, engineered wood fibers, fine or coarse sand, and rounded, fine or medium gravel;~~

~~b. At least six inches of shredded rubber or tires; or~~

~~c. Unitary, impact absorbing surfacing material such as rubber mats and poured in place compositions that meet minimum safety standards when tested in accordance with the procedures described in the American Society for Testing and Materials standard F 1292-99 and has a critical height value (less than 200 G's and less than 1,000 HIC or Head Injury Criteria) equal to or greater than the highest designated play surface on the equipment, and ]~~

~~(ii) [ 2. For indoor use underneath and surrounding equipment, ] padding of two or more inches [ impact absorbing surfacing material specifically designed and tested as playground surfacing such as rubber mats, rubber tiles and poured in place rubber compositions that meet minimum safety standards when tested in accordance with the procedures described in the American Society for Testing and Materials standard F 1292-99 and has a critical height value (less than 200 G's and less than 1,000 HIC or Head Injury Criteria) equal to or greater than the highest designated play surface on the equipment. ]~~

Natural [ 2. ] Hard surfaces such as asphalt, concrete, dirt, grass and compacted materials or flooring covered by carpet or gym mats do not qualify as resilient surfacing.

"Sanitized" means ~~washed to reduce the amount of filth and harmful micro organisms through the use of (i) hot water with soap, detergent or abrasive cleaners or (ii) a chemical sanitizing solution treated in such a way to remove bacteria and viruses from inanimate surfaces through using a disinfectant solution (i.e., bleach solution or commercial chemical disinfectant) or physical agent (e.g., heat). The surface of item is sprayed or dipped into the disinfectant solution and allowed to air dry [ between uses after use of the disinfectant solution ].~~

"Serious injury" means a wound or other specific damage to the body such as, but not limited to, unconsciousness; broken bones; *dislocation*; deep cut requiring stitches; concussion; foreign object lodged in eye, nose, ear, or other body orifice.

[ "*Shelter-in-place*" means the facility or building in which a child day center is located. ]

"Short-term program" means a child day center that operates less than 12 weeks a year.

~~"Significant injury" means a wound or other specific damage to the body such as, but not limited to, head injuries, dislocations, sprains.~~

"Special needs child day program" means a program exclusively serving children with ~~disabilities~~ special needs.

"Specialty camps" means those centers [ ~~which that~~ ] have an educational or recreational focus on one subject such as dance, drama, music, or sports.

"Sponsor" means an individual, partnership, association, public agency, corporation or other legal entity in whom the ultimate authority and legal responsibility is vested for the administration and operation of a center subject to licensure.

"Staff" means administrative, activity, and service personnel including the licensee when the licensee is an individual who works in the center, and any persons counted in the staff-to-children ratios or any persons working with a child without sight and sound supervision of a staff member.

"Staff positions" are defined as follows:

1. "Aide" means the individual designated to be responsible for helping the program leader/~~child care supervisor~~ in supervising children and in implementing the activities and services for children. *Aides may also be referred to as assistant teachers or child care assistants.*

2. "Program leader" or ~~"child care supervisor"~~ means the individual designated to be responsible for the direct supervision of children and for implementation of the activities and services for a group of children. *Program leaders may also be referred to as child care supervisors or teachers.*

3. "Program director" means the primary, on-site director or coordinator designated to be responsible for developing and implementing the activities and services offered to children, including the supervision, orientation, training, and scheduling of staff who work directly with children, whether or not ~~the program director~~ personally ~~performs~~ performing these functions.

~~EXCEPTION: The administrator may perform staff orientation or training or program development functions if the administrator meets the qualifications of 22 VAC 15-30-230 and a written delegation of responsibility specifies the duties of the program director.~~

4. "Administrator" means a manager or coordinator designated to be in charge of the total operation and management of one or more centers. The administrator may be responsible for supervising the program director or, if appropriately qualified, may concurrently serve as the program director. *The administrator may perform staff orientation or training or program development functions if the administrator meets the qualifications of 22 VAC 15-30-230 and a written delegation of responsibility specifies the duties of the program director.*

"Therapeutic child day program" means a specialized program, including but not limited to therapeutic recreation programs, exclusively serving children with ~~disabilities~~ special needs when an individual service, education or treatment plan is developed and implemented with the goal of improving the functional abilities of the children in care.

"Universal precautions" means an approach to infection control. According to the concept of universal precautions, all human blood and certain human body fluids are treated as if known to be infectious for human immunodeficiency virus

(HIV), hepatitis B virus (HBV), and other bloodborne pathogens.

"Volunteer" means a person who works at the center and:

1. Is not paid;
2. Is not counted in the staff-to-children ratios; and
3. Is in sight and sound supervision of a staff member when working with a child.

[ " ] Any unpaid person not meeting this definition shall be considered [ " ] staff" *and shall meet staff requirements.*

## 22 VAC 15-30-30. Purpose and applicability.

A. The purpose of these ~~minimum~~ standards is to protect children under the age of 13 who are separated from their parents during a part of the day by:

1. Ensuring that the activities, services, and facilities of centers are conducive to the well-being of children; and
2. Reducing risks in the environment.

B. The ~~minimum~~ standards in this chapter apply to child day centers as defined in 22 VAC 15-30-10 serving children under the age of 13.

## PART II. ADMINISTRATION.

## 22 VAC 15-30-50. Operational responsibilities.

A. Applications for licensure shall conform with Chapters 17 (§ 63.2-1700 et seq.) and 18 (§ 63.2-1800 et seq.) of Title 63.2 of the Code of Virginia [ *and the regulation entitled General Procedures and Information for Licensure, 22 VAC 40-80* ].

B. Pursuant to §§ ~~63.2-1702, 63.2-1719, 63.2-1721 and 63.2-1722~~ of the Code of Virginia, the sponsor, who may be represented by the individual proprietor, partners, officers, and managers delegated authority to act for the sponsor, shall be of good character and reputation and shall not have been convicted of a felony or a misdemeanor related to abuse, neglect, or exploitation of children or adults ~~63.2-1719 and 63.2-1721~~ [ *and the regulation entitled Background Checks for Child Welfare Agencies, 22 VAC 40-191* ], the applicant and any agent at the time of application who is or will be involved in the day-to-day operations of the center or who is or will be alone with, in control of, or supervising one or more of the children, shall be of good character and reputation and shall not be guilty of an offense. Offenses are barrier crimes, conviction of any other felony not included in the definition of barrier crime unless five years have elapsed since conviction, and a founded complaint of child abuse or neglect.

[ ~~C. The applicant for licensure shall satisfactorily complete department-sponsored training established for potential licensees up to a possible 10 hours of training before receiving an initial license unless:~~

- ~~1. The department does not offer the training;~~

~~2. The applicant for licensure has previously owned or managed a licensed center in strong compliance with the center standards as determined by the department; or~~

~~3. The commissioner or his agents decide to issue a license conditional upon the applicant's completion of the required training. ]~~

[ ~~C. D.~~ ] The sponsor shall afford the commissioner or his agents the right at all reasonable times to inspect facilities and to interview his agents, employees, and any child or other person within his custody or control, provided that no private interviews may be conducted with any child without prior notice to the parent of such child.

[ ~~D. E.~~ ] The license shall be posted in a place conspicuous to the public (§ 63.2-1701 of the Code of Virginia).

[ ~~E. F.~~ ] The operational responsibilities of the licensee shall include, but not be limited to, ensuring that the center's activities, services, and facilities are maintained in compliance with these ~~minimum~~ standards, *the center's own policies and procedures that are required by these standards*, and the terms of the current license issued by the department.

[ ~~F. G.~~ ] Every center shall ensure that any advertising is not misleading or deceptive as required by § 63.2-1713 of the Code of Virginia.

[ ~~H. G.~~ ] *The center shall meet the proof of child identity and age requirements as stated in § 63.2-1809 of the Code of Virginia.*

~~G. [ I. H. ]~~ The sponsor shall maintain public liability insurance for bodily injury for each center site with a minimum limit of at least \$500,000 each occurrence and with a minimum limit of \$500,000 aggregate.

[ ~~1. J.~~ ] A public sponsor may have equivalent self-insurance [ ~~which that~~ ] is in compliance with the Code of Virginia.

[ ~~2. K.~~ ] Evidence of insurance coverage shall be made available to the department's representative upon request.

~~H. [ J. I. ]~~ The center shall develop written procedures for injury prevention.

[ ~~These J. Injury prevention~~ ] procedures shall be *updated at least annually* based on documentation of injuries and a review of the activities and services.

~~I. K.~~ The center shall develop written playground safety procedures which shall include:

1. Provision for active supervision by staff to include positioning of staff in strategic locations, scanning play activities, and circulating among children; and
2. Method of maintaining resilient surface.

~~J. L.~~ Hospital-operated centers may temporarily exceed their licensed capacity during a natural disaster or other catastrophe or emergency situation [ ~~Such centers and~~ ] shall develop a written plan for emergency operations, for submission to and approval by the Department of Social Services.

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~~K. M.~~ When children 13 years or older are enrolled in the program and receive supervision in the licensed program, they shall be counted in the number of children receiving care and the center shall comply with the standards for these children.

## 22 VAC 15-30-70. General recordkeeping; reports.

A. Staff and children's records shall be treated confidentially. Exception: Children's records shall be made available to ~~the custodial parent~~ parents on request, *unless otherwise ordered by the court.*

B. Records and reports on children and staff required by this chapter shall be maintained and made accessible for two years after termination of services or separation from employment unless specified otherwise.

[ C. ] Records may be kept at a central location except as stated otherwise in these standards.

## 22 VAC 15-30-80. Children's records.

[ A. ] Each center shall maintain and keep at the center a separate record for each child enrolled which shall contain the following information:

1. Name, nickname (if any), sex, and birth date of the child;
2. Name, home address, and home phone number of each parent who has custody;
3. When applicable, work phone number and place of employment of each parent who has custody;
4. Name and phone number of child's physician;
5. Name, address, and phone number of two designated people to call in an emergency if a parent cannot be reached;
6. Names of persons authorized to pick up the child. Appropriate legal paperwork shall be on file when the custodial parent requests the center not to release the child to the other parent;
7. Allergies and intolerance to food, medication, or any other substances, and actions to take in an emergency situation;
8. Chronic physical problems and pertinent developmental information and any special accommodations needed;
9. Health information as required by 22 VAC 15-30-150 through 22 VAC 15-30-170;

Exception: When a center is located on the same premises where a child attends school and the child's record has a statement verifying the school's possession of the health record, the center is not required to maintain duplicates of the school's health record for that child provided the school's records are accessible during the center's hours of operation.

10. Written agreements between the parent and the center as required by 22 VAC 15-30-110 ~~A and B~~;

11. *Documentation of [ semiannual ] child updates [ , staff request for parent feedback, ] and confirmation of up-to-*

*date information in the child's record as required by 22 VAC 15-30-490 E 3;*

~~44.~~ 12. Any blanket permission slips and opt out requests;

13. *Previous child day care and schools attended by the child;*

~~42.~~ 14. Name of any additional programs or schools that the child is concurrently attending and the grade or class level; ~~and~~

15. *Documentation of viewing proof of the child's identity and age; and*

~~43.~~ 16. First and last dates of attendance.

[ B. *The proof of identity, if reproduced or retained by the child day program or both, shall be destroyed upon the conclusion of the requisite period of retention. The procedures for the disposal, physical destruction or other disposition of the proof of identity containing social security numbers shall include all reasonable steps to destroy such documents by (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means. ]*

## 22 VAC 15-30-90. Staff records.

[ A. ] The following staff records shall be kept for each staff person:

1. Name, address, verification of age requirement, job title, and date of employment or volunteering; and name, address and telephone number of a person to be notified in an emergency which shall be kept at the center.

2. For staff hired after March 1, 1996, documentation that two or more references as to character and reputation as well as competency were checked before employment or volunteering. If a reference check is taken over the phone, documentation shall include [ : ]

[ a. ] Dates of contact [ ; ; ]

[ b. ] Names of persons contacted [ ; ; ]

[ c. ] The firms contacted [ ; ; ]

[ d. ] Results [ ; ; ] and

[ e. ] Signature of person making call.

3. ~~A criminal record check~~ *Background checks as required by the regulation for Criminal Record entitled Background Checks for Child Welfare Agencies Licensed Child Day Centers (22 VAC 15-55-10 et seq. 22 VAC 15-51).*

4. Written information to demonstrate that the individual possesses the education, orientation training, staff development, certification, and experience required by the job position.

5. First aid, *cardiopulmonary resuscitation* and other ~~certification~~ *certifications* as required by the responsibilities held by the staff member.

6. Health information as required by 22 VAC 15-30-180 and 22 VAC 15-30-190.

7. Information, to be kept at the center, about any health problems which may interfere with fulfilling the job responsibilities.

8. Date of separation from employment.

[ B. ] ~~Exception: [ Centers may allow Background check records for ] independent contractors [ to keep records on its employees or students when the center has a signed written statement that the contractor agrees to maintain the required files and will make them available to a department representative upon request must be kept in accordance with 22 VAC 15-51-70 of the background check regulation ].~~

## **22 VAC 15-30-110. Parental agreements.**

A. A written agreement between the parent and the center shall be in each child's record by the first day of the child's attendance. The agreement shall be signed by the parent and include:

1. An authorization for emergency medical care should an emergency occur when the parent cannot be located immediately unless the parent states *in writing* an objection to the provision of such care on religious or other grounds; and

2. A statement that the center will notify the parent when the child becomes ill and that the parent will arrange to have the child picked up as soon as possible if so requested by the center; and

3. A statement that the parent will inform the center within 24 hours or the next business day after his child or any member of the immediate household has developed any reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported [ ~~within 24 hours~~ immediately ].

~~B. If a parent wishes a school age child to leave the center unaccompanied, written permission from the parent authorizing the child to leave the center shall be secured and the center shall maintain a record of the child leaving unaccompanied.~~

## **[ 22 VAC 15-30-140. Individual service, education or treatment plan for therapeutic child day programs.**

A. An individual service, education or treatment plan:

1. Shall be developed for each child by the director or his designee and primary staff responsible for plan implementation; ;

2. ~~Implementation of the plan shall begin be implemented~~ within 60 days after the first day of the child's attendance.

B. The child's individual service, education or treatment plan shall be developed, reviewed, and revised every three months and rewritten annually by the director or his designee and primary staff responsible for plan implementation. This shall be done in partnership with the parent, residential care provider or advocate.

C. A copy of the initial plan and subsequent or amended service, education or treatment plans shall be maintained in the child's record and a copy given to the child's parent. ]

## **22 VAC 15-30-150. Immunizations for children.**

A. The center shall obtain documentation that each child has received the immunizations required by the State Board of Health before the child can attend the center.

Exemptions (subsection C of § 22.1-271.2 of the Code of Virginia and 12 VAC 5-110-110 of the Regulations for the Immunizations of School Children): Documentation of immunizations is not required for any child whose (i) parent submits an affidavit to the center, on the form entitled "Certification of Religious Exemption," stating that the administration of immunizing agents conflicts with the parent's or child's religious tenets or practices, or (ii) physician or a local health department states on a MCH 213B or MCH 213C, or other Department of Health-approved form that one or more of the required immunizations may be detrimental to the child's health.

~~B. Updated information on The center shall obtain documentation of additional immunizations shall be obtained~~ once every six months for children under the age of two years.

~~C. Updated information on The center shall obtain documentation of additional immunizations shall be obtained~~ once between each child's fourth and sixth birthdays.

## **22 VAC 15-30-160. Physical examinations for children.**

[ A. ] Each child shall have a physical examination by or under the direction of a physician [ : ]

[ 1. ] Before the child's attendance [ ; ] or

[ 2. ] Within one month after attendance. ~~The schedules for examinations prior to attendance for children are listed~~

[ B. ] ~~If the child has had a physical examination prior to attendance, it shall be within the time period prescribed below:~~

1. Within two months prior to attendance for children six months of age and younger;

2. Within three months prior to attendance for children aged seven months through 18 months;

3. Within six months prior to attendance for children aged 19 months through 24 months; and

4. Within 12 months prior to attendance for children two years of age through five years of age.

[ C. ] Exceptions:

1. Children transferring from a facility licensed by the Virginia Department of Social Services, certified by a local department of public welfare or social services, registered as a small family day home by the Virginia Department of Social Services or by a contract agency of the Virginia Department of Social Services, or approved by a licensed family day system:

a. If the initial report or a copy of the initial report of immunizations is available to the admitting facility, no additional examination is required.

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b. If the initial report or a copy of the initial report is not available, a report of physical examination and immunization is required in accordance with 22 VAC 15-30-150 and this section.

2. Pursuant to subsection D of § 22.1-270 of the Code of Virginia, physical examinations are not required for any child whose parent objects on religious grounds. The parent must submit a signed statement noting that the parent objects on religious grounds and certifying that to the best of the parent's knowledge the child is in good health and free from communicable or contagious disease.

## **22 VAC 15-30-180. Tuberculosis screening for staff and independent contractors.**

A. Each staff member and *individual from an independent contractor* shall ~~obtain a screening for tuberculosis and submit documentation of a negative Purified Protein Derivative (PPD) tuberculosis screening conducted within the last two years.~~

*Documentation of the screening shall be submitted no later than 21 days after employment or volunteering and shall have been completed within 12 months prior to or 21 days after employment or volunteering.*

~~Exceptions: For staff who have a contraindication to a Purified Protein Derivative screening, as in the case of those who have received a TB vaccination, documentation of the contraindication and a determination of noncommunicable tuberculosis status from a physician, his designee, or an official of a local health department shall be obtained and submitted every two years to the center. Staff who test positive to the Purified Protein Derivative screening shall meet the requirements of subsection D of this section.~~

B. *Acceptable forms of documentation [ of ~~or~~ ] tuberculosis screenings shall include screening are:*

1. ~~Negative results of the Purified Protein Derivative screening~~ *A clearance statement signed by a physician, the physician's designee or an official of the local health department. This statement shall include language that the individual does not have any current symptoms of active tuberculosis, does not have either a risk factor for acquiring tuberculosis infection or a risk factor for progression to active tuberculosis disease as defined by the local health department, or has been treated for these conditions in the past, and is currently free of tuberculosis in a communicable form. Individuals who have [ either ] a risk factor for progression to active tuberculosis disease as defined by the Virginia Department of Health shall submit documentation as stated in subdivision 2 or 3 of this subsection;*

2. ~~The signature of the physician, the physician's designee, or an official of the local health department; and~~ *The results of a negative tuberculin skin test (TST). The documentation shall include the date the test was given and results of the test and be signed by a physician, physician's designee or an official of the local health department.*

3. ~~The date the screening was evaluated~~ *The results of a chest x-ray negative for active tuberculosis disease. The*

*documentation shall include the date of the test and location where the examination was performed.*

~~C. Each staff member shall obtain and submit a negative Purified Protein Derivative screening in accordance with subsections A and B of this section. At least every two years from the date of the first initial screening or testing, or more frequently as if recommended by a licensed physician or the local health department, staff members and individuals from independent contractors shall obtain and submit the results of a follow-up tuberculosis screening as stated in subsection B of this section.~~

D. Any staff member or individual from an independent contractor who ~~comes in contact with a known case of tuberculosis, who develops progressive respiratory symptoms or who tests positive to the tuberculosis screening shall, regardless of the date of the last screening, obtain and submit within one month of such incident, a determination of noncontagious by a physician or a local health department official. Until such determination is made, that staff member shall not have direct contact with children or food served to the children develops symptoms compatible with active tuberculosis disease, regardless of the date of the last tuberculosis screening or assessment, shall obtain and submit within 14 days a determination of noncontagiousness by a physician or local health department.~~

[ 1. ] *Until such determination is made, that staff member may not be permitted to work at the center.*

[ 2. ] *Any staff member or individual from an independent contractor who comes in contact with a known active case of tuberculosis or who tests positive on a tuberculin skin test, regardless of the date of the last tuberculosis screening or assessment, shall submit within 30 days a statement indicating that all needed follow-up for the incident has been completed and that the individual is free of tuberculosis in a communicable form. This statement shall be signed by a physician, physician's designee or an official of the local health department.*

## **[ 22 VAC 15-30-190. Physical and mental health of staff and volunteers.**

A. When there is evidence that the safety of children may be jeopardized by contact with a staff member or volunteer because of the physical health or mental health of such staff member or volunteer, the licensee shall, at a minimum, prohibit the employee or volunteer from engaging in contact with the children or participation in the food service program until a physician or a clinical psychologist skilled in the diagnosis and treatment of mental illness confirms that any risk has been eliminated or can be reduced to an acceptable level by reasonable accommodations.

~~This B.~~ *The requirement of subsection A of this section should not be construed as a mandatory precondition to any other employment action that an employer may otherwise take. ]*

## **22 VAC 15-30-200. General qualifications.**

A. ~~No staff shall have been convicted of a felony or a misdemeanor related to abuse, neglect, or exploitation of~~



~~children or adults be guilty of an offense, as defined in § 63.2-1719 of the Code of Virginia.~~

B. Staff shall be:

1. Of good character and reputation;
2. Capable of carrying out assigned responsibilities;
3. Capable of accepting training and supervision; and
4. Capable of communicating effectively both orally and in writing as applicable to the job responsibility.

C. Staff who work directly with children shall be capable of communicating with emergency personnel ~~[and] understanding [following instructions on a prescription bottle].~~

D. Staff who drive a vehicle transporting children shall disclose any traffic violation that occurred prior to or during employment or assignment as a driver.

~~D.~~ E. For therapeutic child day programs and special needs child day programs, staff who work with children shall have knowledge of the groups being served and skills specific to the ~~disabilities~~ special needs of the children in care including, but not limited to, functional abilities, accommodations, assessment techniques, behavior management, and medical and health concerns.

## 22 VAC 15-30-230. Program director qualifications.

A. Program directors shall be at least 21 years of age and shall ~~have meet one of the following:~~

1. A graduate degree in a child-related field *such as, but not limited to, elementary education, nursing, or recreation* from an ~~accredited~~ a college or university and six months of programmatic experience ~~in the group care of children;~~
2. An endorsement or bachelor's degree in a child-related field *such as, but not limited to, elementary education, nursing, or recreation* from an ~~accredited~~ a college or university and one year of programmatic experience ~~in the group care of children;~~
3. Forty-eight semester hours or 72 quarter hours of college credit ~~in a child-related field~~ from an ~~accredited~~ a college or university of which 12 semester hours or 18 quarter hours are in child-related subjects and one year of programmatic experience ~~in the group care of children;~~
4. Two years of programmatic experience ~~in the group care of children~~ with one year in a staff supervisory capacity and at least one of the following ~~educational~~ education backgrounds:
  - a. A one-year early childhood certificate from an ~~accredited~~ a college or university that consists of at least 30 semester hours;
  - b. A child development credential ~~by an organization approved by the department~~ that requires [ ; : ]

(1) High school program completion or the equivalent;

(2) 480 hours ~~[of a supervised practicum]~~ working with children in a group ~~[which could include a supervised practicum]; and~~

[ (3) Determination of competency in promoting children's development, providing a safe and healthy environment, managing the classroom environment and/or childhood program, and promoting positive and productive relationships with parents/guardians; and ]

~~[ (3) ]~~ (4) At least 120 clock hours of child-related training taught by an individual ~~[with or by an organization with expertise in early childhood teacher preparation provided that the training facilitator:~~

(a) Documents the student's mastery and competence;

(b) Observes the student's application of competence in a classroom setting;

(c) Has ] a combination of at least six years of ~~[either]~~ education [ ( ) leading to a degree or credential in a child-related field ( ) ] or programmatic experience ~~[ as long as the person; and~~

(d) Has at least 12 semester hours [ or 180 clock hours ] in a child-related field, a child development ~~[ associate ]~~ credential or equivalent, and two years of programmatic experience with one year in a staff supervisory capacity; or

c. A certification of qualification from an internationally or nationally recognized Montessori organization; or

5. Three years of programmatic experience ~~in the group care of children with including~~ one year in a staff supervisory capacity and fulfilled a high school diploma program completion or G.E.D. or verification of completion of a home school program approved by the state the equivalent.

[ a. ] Such programmatic experience shall be obtained in a [ regulated ] child day center that offers a staff training program that includes: *written goals and objectives; assessment of the [ employees employee's ] participation in the training; and the subject areas of first aid, human growth and development birth to age 12 years, health and safety issues and behavioral management of children.* ~~Such training shall be completed by the employee and documented by the center.~~

[ b. ] Such employees shall complete 120 hours of training during this three-year period and provide documentation of completing the training.

~~[ Three years after the effective date of this regulation c. Effective June 1, 2008 ],~~ program directors shall meet a qualification as stated in [ subdivision subdivisions ] 1 through 4 of this subsection.

[ 6. ] Exception [ (a) ]: Program directors hired before [ ~~the effective date of this regulation~~ June 1, 2005, ] who do not meet the qualifications may continue to be program directors as long as the program director: (i) obtains each year [ ~~six~~ three ] semester hours or [ ~~nine~~ six ] quarter

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hours of college credit related to children until meeting a qualification option or (ii) is enrolled in and regularly works toward a child development credential as specified in [ subdivision ] 4 b of this subsection, which credential must be awarded [ ~~within two years of the effective date of the regulation~~ by June 1, 2009 ].

[ Exception (b): Program directors hired or promoted on or after June 1, 2005, until June 1, 2006, who do not meet the qualifications may continue to be program directors as long as the program director: (i) obtains each year six semester hours or nine quarter hours of college credit related to children until meeting a qualification option or (ii) is enrolled in and regularly works toward a child development credential as specified in subdivision 4 b of this subsection, which credential must be awarded no later than June 1, 2007. ]

B. Program directors without management experience shall have one college course in a business-related field [ ~~or, ] 10 clock hours of management training [ ~~Such management training shall increase according to the following:~~ , or one child care management course that satisfactorily covers the management functions of:~~

1. Planning;
2. Budgeting;
3. Staffing; and
4. Monitoring.

\*Note: Management experience is defined as at least six months of on-the-job training in an administrative position that requires supervising, orienting, training, and scheduling staff. ]

[ One year after [ the effective date of the regulation ]	20 hours
Two years after [ the effective date of the regulation ]	30 hours
Three years after [ the effective date of the regulation ]	40 hours ]

~~B.~~ C. For program directors of therapeutic child day programs and special needs child day programs, education and programmatic experience shall be in the group care of children with ~~disabilities~~ special needs.

~~G.~~ D. Notwithstanding subsection A of this section, a person between 19 and 21 years of age may serve as a program director at a short-term program serving only school age children if the program director has daily supervisory contact by a person at least 21 years of age who meets one of the program director qualification options.

## 22 VAC 15-30-250. Program directors and back-up for program directors.

[ A. ] The center shall have a qualified program director or a qualified back-up program director who meets one of the director qualifications who shall regularly be on site at least 50% of the center's hours of operation, ~~provided that if the program employs.~~

[ B. ] For centers offering multiple shifts a qualified program director or qualified back-up director shall regularly be on site at least 50% of the day shift and at least two hours during the evening shift and two hours during the night shift.

[ C. ] For centers employing one or more program leaders ~~or child care supervisors~~ who are qualified under subsection C of 22 VAC 15-30-260 but not under subsection A of that section, the qualified program director or qualified back-up program director shall be on site at least 75% of the center's hours of operation.

## 22 VAC 15-30-260. Program leader and ~~child care supervisor~~ qualifications.

A. Program leaders ~~and child care supervisors~~ shall be at least 18 years of age, [ have ] fulfilled a high school program completion or the equivalent, and shall meet one of the ~~program director qualifications in 22 VAC 15-30-230 or have~~ following:

1. [ Have ] one of the program director qualifications in 22 VAC 15-30-230;
2. Have an endorsement or bachelor's degree in a child-related field such as, but not limited to, elementary education, nursing, or recreation, from a college or university;
- ~~4.~~ 3. Have three months of programmatic experience ~~in the group care of children~~ and at least one of the following educational backgrounds:

a. A one year early childhood certificate from an ~~accredited~~ a college or university that consists of at least 30 semester hours;

b. A child development credential by an organization ~~approved by the department~~ listed in § 63.2-1738 of the Code of Virginia;

c. A teaching diploma from an internationally or nationally recognized Montessori organization; or

~~2.~~ 4. A high school diploma or G.E.D. or verification of completion of a home school program approved by the state, and Have six months of supervised programmatic experience ~~in the group care of children.~~

[ a. ] Within six months before being promoted or beginning work or one month after being promoted or beginning work, a minimum of 12 hours of training shall be received related to the care of children, including but not limited to:

[ ~~a.~~ (1) ] Child development [ ; ]

[ ~~b.~~ (2) ] Playground safety [ ~~and~~ ; ]

[ ~~c.~~ (3) ] Health and safety issues [ ; ] including [ ; ] and

[ ~~d.~~ (4) ] Preventing and reporting child abuse and neglect ~~shall be received.~~

[ b. ] Such training may take place on site while not supervising children. Such training hours shall increase according to the following:

[ (1) ] Program leaders hired or promoted  
[ ~~one year after the effective date of the~~  
~~regulations after June 1, 2006~~ ] 16 hours

[ (2) ] Program leaders hired or promoted  
[ ~~two years after the effective date of the~~  
~~regulations after June 1, 2007~~ ] 20 hours

[ (3) ] Program leaders hired or promoted  
[ ~~three years after the effective date of~~  
~~the regulations after June 1, 2008~~ ] 24 hours

B. For program leaders ~~and child care supervisors~~ of therapeutic child day programs and special needs child day programs, at least three months of programmatic experience shall be in the group care of children with ~~disabilities~~ special needs.

C. Notwithstanding ~~the experience requirements in~~ subsection A of this section, program leaders at short-term programs may have only one season of programmatic ~~or general~~ experience [ ~~in the group care of children~~ ], provided that this experience shall include at least [ ~~250~~ 200 ] hours, of which up to 24 hours can be formal training, working directly with children in a group.

## 22 VAC 15-30-290. Independent contractors; volunteers.

A. Individuals from independent contractors shall not be counted in the staff-to-children ratios unless they meet the qualifications for the applicable position.

B. Individuals from independent contractors who do not meet staff qualifications shall, when in the presence of children, be within sight and sound supervision of a staff member.

C. Volunteers who work with children shall be at least 13 years of age.

## 22 VAC 15-30-310. Staff ~~orientation~~ training and development.

A. Staff shall receive the following training by the end of their first day of assuming job responsibilities:

1. Job responsibilities and to whom they report;
2. The policies and procedures listed in subsection B of this section and 22 VAC 15-30-490 A that relate to the staff member's responsibilities;
3. The center's playground safety procedures unless the staff member will have no responsibility for playground activities or equipment;
4. Recognizing child abuse and neglect and the [ ~~law~~ legal ] requirements for reporting suspected child abuse as required by § 63.2-1509 of the Code of Virginia;
4. 5. Confidential treatment of personal information about children in care and their families; and
5. 6. The minimum standards in this chapter which ~~that~~ relate to the staff member's responsibilities.

B. By the end of the first day of supervising children, staff shall be provided in writing with the information listed in 22 VAC 15-30-490 A and the following:

1. Procedures for supervising a child who may arrive after scheduled classes or activities including field trips have begun;

2. Procedures to confirm absence of a child when the child is scheduled to arrive from another program or from an agency responsible for transporting the child to the center;

3. Procedures for identifying where attending children are at all times, including procedures to ensure that all children are accounted for before leaving a field trip site and upon return to the center;

4. Procedures for action in case of lost or missing children, ill or injured children, medical emergencies and general emergencies;

5. Policy for any administration of medication; and

6. Procedures for response to natural and man-made disasters.

C. ~~In addition to first aid and orientation training required elsewhere in this chapter,~~ Program directors and staff who work directly with children shall annually attend ~~eight~~ 10 hours of staff development activities that shall be related to child safety and development and the function of the center. Such training hours shall increase according to the following:

[ ~~One year after the effective date of the~~  
~~regulation 1. June 1, 2006~~ ] 12 hours

[ ~~Two years after the effective date of the~~  
~~regulation 2. June 1, 2007~~ ] 14 hours

[ ~~Three years after the effective date of the~~  
~~regulation 3. June 1, 2008~~ ] 16 hours

[ 4. ] Staff development activities to meet this subsection may [ ~~not~~ ] include [ up to two hours of ] training in first aid [ ~~or~~ ] cardiopulmonary resuscitation [ ~~or~~ ]. Staff development activities to meet this subsection may not include rescue breathing and first responder as required by 22 VAC 15-30-590 and training in medication administration and daily health observation of children as required by subsection D of this section.

[ 5. ] Exception [ (a) ]: Staff who drive a vehicle transporting children and do not work with a group of children at the center do not need to meet the annual training requirement.

[ Exception (b): Parents who participate in cooperative preschool centers shall complete four hours of orientation training per year.

Exception (c): Staff who are employed at a short-term program shall obtain 10 hours of staff training per year. ]

D. [ ~~There always shall be at least one staff member on duty who has obtained within the last 12 months instruction in medication administration and performing the daily health observation of children. This instruction shall be obtained from a physician, registered nurse [ R.N., L.P.N., or health department medical personnel ] at three-year intervals [ and, for medication administration training it may be obtained from a pharmacist. Staff with ] this [ daily health observation training shall observe daily each child for signs and symptoms~~

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~~of illness. Medication administration training shall include but not be limited to the procedural aspects of medication administration, the safe handling and storage of medications, and documentation.~~ 1. To safely perform medication administration practices listed in 22 VAC 15-30-580, effective June 1, 2007, whenever the center has agreed to administer prescribed or over-the-counter medications other than topical skin gel, cream, or ointment, the administration must be performed by a staff member or independent contractor who has satisfactorily completed a training course developed or approved by the Department of Social Services in consultation with the Department of Health and the Board of Nursing and taught by an R.N., L.P.N., physician, or pharmacist. Exception: Persons who do not ordinarily administer medications but who supervise children needing emergency medications, such as but not limited to albuterol, glucagon, and epipens, shall be required to complete only the portion of the curriculum designated for that purpose.

a. The course, which shall include competency guidelines, shall reflect currently accepted safe medication administration practices, including instruction and practice in topics such as, but not limited to, reading and following prescriptions and prescriber's orders; observing relevant laws, policies and regulations; and demonstrating knowledge of safe practices for medication storage and disposal, recording and reporting responsibilities, and side effects and emergency recognition and response. The course shall designate portions required for persons who might be required only to administer emergency medications.

b. The approved training curriculum and materials shall be reviewed by the department at least every three years and revised as necessary.

c. Staff required to have the training shall be retrained at three-year intervals, with interim refresher training and practice demonstrations annually.

2. The decision to administer medicines at a facility may be limited by center policy to:

a. Prescribed medications;

b. Over-the-counter or nonprescription medications; or

c. No medications except those required for emergencies or by law.

3. Effective until June 1, 2007, any staff member or independent contractor that administers prescription or over-the-counter medication, with the exception of topical skin gel, cream, or ointment, shall be trained by an R.N., L.P.N., physician, or pharmacist to:

a. Check to be sure that the name of the child on the medication and the child receiving the medication are the same;

b. Read and understand the label or prescription directions in English, including the measured dose, frequency, and other circumstances relative to administration (e.g., taking a medication with meals);

c. Administer the medication according to the prescribed methods and the prescribed dose on the prescription or manufacturer's label;

d. Observe, record, and report to the parent any adverse reactions and side effects from medications; and

e. Document the administration of each dose in accordance with 22 VAC 15-30-580.

4. Any child for whom emergency medications (such as but not limited to albuterol, glucagon, and epipen) have been prescribed shall always be in the care of a provider that has been trained in the administration of emergency medication specific to each such child's condition.

5. There shall always be at least one staff member on duty who has obtained within the last three years instruction in performing the daily health observation of children.

6. Daily health observation training shall include:

a. Components of daily health check for children;

b. Inclusion and exclusion of the child from the class when the child is exhibiting physical symptoms that indicate possible illness;

c. Descriptions of how diseases are spread and the procedures or methods for reducing the spread of disease;

d. Information concerning the Virginia Department of Health Notification of Reportable Diseases pursuant to 12 VAC 5-90-80 and 12 VAC 5-90-90, also available from the local health department and the website of the Virginia Department of Health; and

e. Staff occupational health and safety practices in accordance with Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogens regulation. ]

E. Before assuming job responsibilities, staff who work with children in therapeutic child day programs and special needs child day programs shall receive training in:

1. Universal precautions procedures;

2. Activity adaptations;

3. Medication administration;

4. Disabilities precautions and health issues; and

5. Appropriate intervention strategies.

F. For therapeutic child day programs and special needs child day programs, staff who work directly with children shall annually attend 24 hours of staff development activities. At least eight hours of this training shall be on topics related to the care of children with disabilities special needs.

## PART IV. PHYSICAL PLANT.

### **22 VAC 15-30-320. Approval from other agencies; requirements prior to initial licensure.**

A. Before issuance of the first license and before use of newly constructed, renovated, remodeled, or altered buildings or sections of buildings, written documentation of the following shall be provided by the ~~applicant or licensee~~ center to the licensing representative:

1. Approval ~~from~~ by the appropriate authority having jurisdiction that ~~the buildings meet each building meets~~ building and fire codes or that a plan of correction has been approved; and

Exception: Any building which is currently approved for school occupancy and which houses a public or private school during the school year shall be considered to have met the requirements of subdivision 1 of this subsection when housing a center only serving children two and a half years of age or older.

2. Approval from the local health department, or approval of a plan of correction, for meeting requirements for:

- a. Water supply;
- b. Sewage disposal system; and
- c. Food service, if applicable.

B. For buildings built before 1978, ~~the following shall be submitted before the initial license is issued:~~

1. A written statement from a person licensed in Virginia as an asbestos inspector and management planner ~~shall be submitted before the first license is issued. The statement shall comply with as required by § 63.2-1811 of the Code of Virginia and the requirements of the Asbestos Hazard Emergency Response Act (15 USC § 2641 et seq.); and~~

2. ~~A written statement that the response actions to abate any risk to human health have been or will be initiated in accordance with a specific schedule and plan as recommended by the asbestos management planner in accordance with § 63.2-1811 of the Code of Virginia.~~

C. ~~The administrator shall post~~ A notice regarding the presence and location of asbestos containing materials and advising that the asbestos inspection report and management plan are available for review ~~shall be posted.~~

Exception: The provisions of subsections B and C of this section do not apply to centers located in buildings required to be inspected according to Article 5 (§ 2.2-1162 et seq.) of Chapter 11 of Title 2.2 of the Code of Virginia.

D. Before the first license is issued, camps shall notify the ~~closest responsible fire department and the closest rescue squad or similar emergency service organization, responsible emergency medical service of the camp location and hours of operation.~~

### **22 VAC 15-30-330. Approval from other agencies; requirements subsequent to initial licensure.**

A. ~~The center shall provide to the licensing representative an annual fire inspection report shall be provided to the licensing representative from the appropriate fire official having jurisdiction.~~

Exception: If a center is located in a building currently housing a public or private school, the school's annual fire inspection report shall be accepted ~~instead of the requirements of this subsection.~~

B. After the first license, annual approval from the health department shall be provided, or approvals of a plan of correction, for meeting requirements for:

1. Water supply;
2. Sewage disposal system; and
3. Food service, if applicable.

C. For those buildings where asbestos containing materials are detected and not removed, ~~the administrator shall:~~

1. ~~Submit to the department~~ A signed, written statement that the center is following the recommendations of the management plan ~~shall be submitted to the department before subsequent licenses are issued; and~~

2. ~~Post a~~ The notice regarding the presence and location of asbestos containing materials and advising that the asbestos inspection report and management plan are available for review ~~shall continue to be posted.~~

[ 3. ] Exception: The provisions of this subsection do not apply to child day centers located in buildings required to be inspected according to Article 5 (§ 2.2-1162 et seq.) of Chapter 11 of Title 2.2 of the Code of Virginia.

### **22 VAC 15-30-340. Building maintenance.**

A. Areas and equipment of the center, inside and outside, shall be maintained in a clean, safe and operable condition. ~~Unsafe conditions shall include, but not be limited to, splintered, cracked or otherwise deteriorating wood; chipped or peeling paint; visible cracks, bending or warping, rusting or breakage of any equipment; head entrapment hazards; and protruding nails, bolts or other components that could entangle clothing or snag skin.~~

B. Heat shall be supplied from ~~an officially approved~~ a heating system ~~approved in accordance with the Uniform Statewide Building Code (USBC, 13 VAC 5-62) except for camps.~~ The heating system shall:

1. Be installed to prevent accessibility of children to the system; and
2. Have appropriate barriers to prevent children from being burned, shocked, or injured from heating equipment. In addition, proper supervision shall be available to prevent injury.

[ 3. ] Exception: In case of emergency, portable heaters may be used in accordance with the manufacturer's instructions.

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C. In inside areas occupied by children, the temperature shall be maintained no lower than 68°F.

D. Fans or other cooling systems shall be used when the temperature of inside areas occupied by children exceeds 80°F.

E. Drinking fountains or individual disposable cups with safe drinking water shall be accessible at all times.

F. Equipment shall include, but not be limited to, the following:

1. Outside lighting provided at entrances and exits used by children before sunrise or after sundown; and
2. An in-service, nonpay telephone.

## **22 VAC 15-30-350. Hazardous substances and other harmful agents.**

A. No center shall be located where conditions exist that would be hazardous to the health and safety of children.

B. Hazardous substances such as cleaning materials, insecticides, and pesticides shall be kept in a locked place using a safe locking method that prevents access by children.

[ 1. ] If a key is used, the key shall not be accessible to the children.

[ 2. ] *Exception: Cleaning supplies to clean and sanitize the diapering area or toilet chairs do not need to be kept locked during diapering or toilet training time as long as they are inaccessible to children.*

C. Pesticides or insecticides shall not be stored in areas used by children or in areas used for food preparation or storage.

D. Cleaning *and sanitizing* materials shall not be located above food, food equipment, utensils or single-service articles and shall be stored in areas physically separate from food.

E. Cleaning materials (e.g., detergents, sanitizers and polishes) and insecticides/pesticides shall be stored in areas physically separate from each other.

F. Hazardous substances shall be stored in the original container unless this container is of such a large size that its use would be impractical.

G. If hazardous substances are not kept in original containers, the substitute containers shall clearly indicate their contents and shall not resemble food or beverage containers.

H. Cosmetics, medications, or other harmful agents shall not be stored in areas, purses or pockets that are accessible to children.

I. Hazardous art and craft materials shall not be used with children.

J. Smoking shall be prohibited in the interior of a center that is not used for residential purposes.

[ K. ] In residential areas of the center and outside the center, smoking shall be prohibited in the presence of children.

## **22 VAC 15-30-360. General physical plant requirements for centers serving children of preschool age or younger.**

In areas used by children of preschool age or younger, the following shall apply:

~~1. Steps with three or more risers and a total height of more than 20 inches shall have a guardrail or barrier and a handrail having a minimum and maximum height of 30 inches and 38 inches respectively. The distance between any posts shall be no greater than 3 inches. Guardrails and handrails shall be provided in accordance with the USBC (13 VAC 5-62) in effect at time of first occupancy or construction.~~

2. Fans, when used, shall be out of reach of children and cords shall be secured so as not to create a tripping hazard.

3. Electrical outlets shall have protective covers that are of a size that cannot be swallowed by children.

## **22 VAC 15-30-370. General physical plant requirements for centers serving school age children.**

A. Any building which is currently approved for school occupancy and which houses a school during the school year shall be considered to have met the building requirements in this regulation when housing a center only serving school age children.

B. Portable camping equipment for heating or cooking that is not required to be approved by the building official shall bear the label of a *nationally* recognized inspection agency *and be used in accordance with the manufacturer's specifications*, except for charcoal and wood burning cooking equipment.

C. No cooking or heating shall occur in tents *except as provided by the USBC (13 VAC 5-62).*

## **22 VAC 15-30-380. Areas.**

~~A. [ There shall be 25 square feet of indoor space available per child. Two years after [ the effective date of the regulation ], there shall be 30 square feet of indoor space per child. Five years after [ the effective date of the regulation ], there shall be 35 square feet of indoor space per child. Indoor space shall be measured inside wall-to-wall excluding spaces not routinely used by children as referenced in subdivisions 1 and 2 of this subsection: ]~~

1. Areas not routinely used for children's activities shall not be calculated as available space.

[ 2. ] Space not calculated shall include, but not be limited to, offices, hallways, restrooms, kitchens, storage rooms or closets.

~~[ B. There shall be 25 square feet of indoor space available per child until subdivisions 1 and 2 of this subsection take effect.~~

*1. Effective June 1, 2008, applicants must have 35 square feet of indoor wall-to-wall space per child.*

*2. Current licensees and subsequent licensees at currently licensed facilities may continue to provide 25 square feet per child.*

3. *New additions shall have 35 square feet of indoor wall-to-wall space per child effective June 1, 2008.* ]

[ ~~2~~. C. ] Space in areas used by infants shall be calculated separately from space for older children. There shall be a minimum of 25 square feet of space per infant excluding space occupied by cribs and changing tables or a minimum of 35 square feet of available space per infant including space occupied by cribs and changing tables.

[ ~~3~~. D. ] Camps for school age children are not required to meet this space requirement. However, when weather prevents outdoor activities, ~~25 square feet of the required~~ indoor space per child shall be provided either at the program site or at a predesignated, approved location off site.

[ ~~B~~. E. ] When children are on the outdoor play area, at least 75 square feet of space per child shall be provided at any one time.

[ ~~C~~. F. ] Centers licensed for the care of infants and toddlers shall provide a separate playground area for these children ~~which~~ that has at least 25 square feet of unpaved surface per infant/toddler on the outdoor area at any one time. This space may be counted as part of the 75 square feet required in subsection B of this section.

[ ~~D~~. G. ] A separate space shall be designated for children who are ill or injured.

## **22 VAC 15-30-390. Restroom areas and furnishings.**

A. Centers shall be provided with at least two toilets and two sinks.

B. Each restroom area provided for children shall:

1. Be within a contained area, readily available and within the building used by the children (Exception: Restrooms used by school age children at camps are not required to be located within the building);
2. Have toilets that are flushable;
3. Have sinks *located* near the toilets and that are supplied with running warm water ~~which~~ that does not exceed 120°F (Exception: Camps are exempt from the requirement that running water be warm); and
4. Be equipped with soap, toilet paper, and disposable towels or an air dryer within reach of children.

C. For restrooms available to males, urinals shall not be substituted for more than one-half the required number of toilets.

D. An adult size toilet with privacy shall be provided for staff use. Staff toilets may be counted in the number of required toilets for children only if children are allowed unrestricted access to them.

Exception: Primitive camps are not required to have a toilet with privacy for staff.

E. Centers shall be provided with at least one toilet and one sink per 20 preschool children and at least one standard size toilet and one sink per 30 school age children. When sharing restroom areas with other programs, the children in those

programs shall be included in the toilet and sink ratio calculations. The toilet and sink ratio appropriate to the younger age group shall apply.

F. When child size toilets, urinals, and low sinks are not available in restrooms used by children of preschool age and younger, one or more platforms or sets of steps shall be provided.

G. School age children of the opposite sex shall not use the same restroom at the same time.

H. A restroom used for school age children that contains more than one toilet shall have at least one toilet enclosed.

I. Restrooms used by school age children at primitive camps are not required to have:

1. Sinks, if adequate water, supplies, and equipment for hand washing are available; and
2. Flushable toilets, if the number of sanitary privies or portable toilets constructed and operated in accordance with the applicable law and regulations of the Virginia Department of Health meets the toilet ratio stated in subsection E of this section. No privy or outdoor toilet shall be located within 75 feet of other buildings or camp activities.

## **22 VAC 15-30-410. Play areas.**

A. Playgrounds shall be located and designed to protect children from hazards.

B. Where playground equipment is provided, resilient surfacing shall [ *comply with minimum safety standards when tested in accordance with the procedures described in the American Society for Testing and Materials standard F1292-99 as shown in Figures 2 (Compressed Loose Fill Synthetic Materials Depth Chart) and 3 (Use Zones for Equipment) on pages 6-7 of the National Program for Playground Safety's "Selecting Playground Surface Materials: Selecting the Best Surface Material for Your Playground," February 2004, and shall* ] be under equipment with moving parts or climbing apparatus to create a fall zone free of hazardous obstacles. Fall zones are defined as the area underneath and surrounding equipment that requires a resilient surface. A fall zone shall encompass sufficient area to include the child's trajectory in the event of a fall while the equipment is in use. [ *Falls zones shall not include barriers for resilient surfacing. Where steps are used for accessibility, resilient surfacing is not required.* ]

C. Ground supports shall be covered with materials that protect children from injury.

D. Swing seats shall be constructed with flexible material.

[ 1. ] *Exceptions: Nonflexible molded swing seats may be used only in a separate infant or toddler play area.*

[ 2. ] *Swings made specifically for a child with a special need shall be permitted in any area as long as a staff member [ ~~stays within arm's length of any hard molded swing when in use and~~ ] is positioned to see and protect other children who might walk into the path of the swing.*

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E. Sandboxes with bottoms which prevent drainage shall be covered when not in use.

F. *A shady area shall be provided on playgrounds [ during the months of June, July, and August ].*

## PART V. STAFFING AND SUPERVISION.

### 22 VAC 15-30-430. Supervision of children.

A. When staff are supervising children, they shall always ensure their care, protection, and guidance.

B. During the center's hours of operation, one adult on the premises shall be in charge of the administration of the center. This person shall be either the administrator or an adult appointed by the licensee or designated by the administrator.

C. During the stated hours of operation, there always shall be on the premises and on field trips when one or more children are present one staff member who meets the qualifications of a program leader, ~~child care supervisor~~, or program director and an immediately available staff member, volunteer or other employee who is at least 16 years of age, with direct means for communication between the two of them. The volunteer or other employee shall have received instruction in how to contact appropriate authorities if there is an emergency.

D. In each grouping of children at least one staff member who meets the qualifications of a program leader, ~~child care supervisor~~, or program director shall be regularly present. Such ~~staff member~~ [ a ] *program leader* shall supervise no more than two aides.

[ E. ] *Exception: A program leader is not required in each grouping of children during the first and last hour of operation when a center operates more than six hours per day and during the designated rest period if the following are met: (i) there is a staff member in the group who is over 18 years of age and has at least three months of programmatic experience at the center; (ii) there is an additional staff person on site who meets program leader qualifications, is not counted in the staff-to-children ratios and is immediately available to help if needed; and (iii) there is a direct means for communicating between these two staff members.*

[ ~~E. F.~~ ] Children under 10 years of age always shall be within actual sight and sound supervision of staff, except that staff need only be able to hear a child who is using the restroom provided that:

1. There is a system to assure that individuals who are not staff members or persons allowed to pick up a child in care do not enter the restroom area while in use by children; and
2. Staff check on a child who has not returned from the restroom after five minutes. *Depending on the location and layout of the restroom, staff may need to provide intermittent sight supervision of the children in the restroom area during this five-minute period to assure the safety of children and to provide assistance to children as needed.*

[ ~~F. G.~~ ] Children 10 years of age and older shall be within actual sight and sound supervision of staff except when the following requirements are met:

1. Staff can hear or see the children (video equipment, intercom systems, or other technological [ ~~device~~ devices ] shall not substitute for staff being able to directly see or hear children);
2. Staff are nearby so they can provide immediate intervention if needed;
3. There is a system to ensure that staff know where the children are and what they are doing;
4. There is a system to ensure that individuals who are not staff members or persons allowed to pick up children in care do not enter the areas where children are not under sight supervision; and
5. Staff provide sight and sound supervision of the children at variable and unpredictable intervals not to exceed 15 minutes.

[ ~~G. H.~~ ] When the outdoor activity area is not adjacent to the center, there shall be at least two staff members on the outdoor activity area whenever one or more children are present.

[ ~~H. I.~~ ] Staff shall greet each child upon arrival at the center and oversee each child's departure from the center.

[ ~~I. J.~~ ] *Staff [ may shall ] not allow a child to leave the center unsupervised.*

### 22 VAC 15-30-440. Staff-to-children ratio requirements [ ~~and group size requirements~~ ].

A. Staff shall be counted in the required staff-to-children ratios only when they are directly supervising children.

B. A child volunteer 13 years of age or older not enrolled in the program shall not be counted as a child in the staff-to-children ratio requirements.

C. When children are regularly in ongoing mixed age groups, the staff-to-children ratio [ ~~and the group size requirement~~ ] applicable to the youngest child in the group shall apply to the entire group.

D. During the designated rest period *and the designated sleep period of evening and overnight care programs*, the ratio of staff to children may be double the number of children to each staff required by subdivisions E 2 through 4 and [ ~~6 7~~ ] of this section if:

1. A staff person is within sight and sound of the resting/sleeping children;
2. Staff counted in the overall rest period ratio are within the building and available to ensure safe evacuation in an emergency; and
3. An additional person is present at the center to help, if necessary.

E. The following ratios of staff to children are required wherever children are in care:



1. For children from birth to the age of 16 months: one staff member for every four children;
2. For children 16 months old to two years: one staff member for every five children;
3. For *two-year-old* children ~~from two years to four years~~: one staff member for every ~~40~~ *eight* children [ *effective June 1, 2006* ];
4. For children from ~~four~~ *three* years to the age of eligibility to attend public school, five years by September 30: one staff member for every ~~42~~ *10* children [ *effective June 1, 2006* ];
5. For [ ~~school-age~~ ] children [ *from age of eligibility to attend public school through eight years* ], one staff member for every ~~20~~ *18* children; and

[ *6. For children from nine years through 12 years, one staff member for every 20 children effective June 1, 2006.* ]

[ ~~6- 7.~~ ] Notwithstanding subdivisions ~~3 through 4~~ and 5 of this subsection and subsection C of this section, the ratio for balanced mixed-age groupings of children [ ~~ages three through six years of age~~ ] shall be one staff member for every ~~45~~ *14* children, provided:

- a. If the program leader ~~or child care supervisor~~ has an extended absence, there shall be sufficient substitute staff to meet a ratio of one staff member for every 12 children.
- b. The center shall have readily accessible and in close classroom proximity auxiliary persons sufficient to maintain a 1:10 adult-to-child ratio for all three-year-olds who are included in balanced mixed-age groups to be available in the event of emergencies.
- c. The program leader ~~or child care supervisor~~ has received training in classroom management of balanced mixed-age groupings of at least eight hours.

F. With a parent's written permission and a written assessment by the program director and ~~child care supervisor~~ ~~or~~ program leader, a center may choose to assign a child to a different age group if such age group is more appropriate for the child's developmental level and the staff-to-children ratio shall be for the established age group.

[ *1.* ] If such developmental placement is made for a child with a ~~disability~~ *special need*, a written assessment by a recognized agency or professional shall be required at least annually. *These assignments are intended to be a permanent new group and staff members for the child.*

[ *2.* ] A center may [ ~~not~~ ] temporarily reassign a child from his regular group and staff members for reasons of administrative [ ~~convenience or otherwise~~ *necessity but not* ] casually or repeatedly disrupt a child's schedule and attachment to his staff members and group.

G. For therapeutic child day programs, in each grouping of children of preschool age or younger, the following ratios of staff to children are required according to the ~~disabilities~~ *special needs* of the children in care:

1. For children with severe and profound disabilities, multiple ~~disabilities~~ *special needs*, *serious medical need*, or serious emotional disturbance: one staff member to three children.

2. For children diagnosed as trainable mentally retarded (TMR), or with physical and sensory disabilities, or with autism: one staff member to four children.

3. For children diagnosed as educable mentally retarded (EMR) or developmentally delayed or diagnosed with attention deficit/hyperactivity disorder (AD/HD): one staff member to five children.

4. For children diagnosed with specific learning disabilities: one staff member to six children.

5. When children with varied ~~disabilities~~ *special needs* are regularly in ongoing groups, the staff-to-children ratio applicable to the child with the most significant ~~disability~~ *special need* in the group shall apply to the entire group.

[ *6.* ] Note: Whenever 22 VAC 15-30-440 E requires more staff than 22 VAC 15-30-440 G because of the children's ages, 22 VAC 15-30-440 E shall take precedence over 22 VAC 15-30-440 G.

H. For therapeutic child day programs, in each grouping of school age children, the following ratios of staff to children are required according to the ~~disabilities~~ *special needs* of the children in care:

1. For children with severe and profound disabilities, autism, multiple ~~disabilities~~ *special needs*, *serious medical need*, or serious emotional disturbance: one staff member to four children.

2. For children diagnosed as trainable mentally retarded (TMR), or with physical and sensory disabilities; attention deficit/hyperactivity disorder (AD/HD), or other health impairments: one staff member to five children.

3. For children diagnosed as educable mentally retarded (EMR), or developmentally delayed: one staff member to six children.

4. For children diagnosed with specific learning disabilities, or speech or language impairments: one staff member to eight children.

5. When children with varied ~~disabilities~~ *special needs* are regularly in ongoing groups, the staff-to-children ratio applicable to the child with the most significant ~~disability~~ *special need* in the group shall apply to the entire group.

[ ~~1. Two years after [ the effective date of the regulation ], the maximum number of children present for ongoing groups of children shall be:~~

~~1. 12 for children from birth to the age of 16 months;~~

~~2. 15 for children 16 months old to two years;~~

~~3. 16 for two-year-old children;~~

~~4. 20 for three-year-old children to the age of eligibility to attend public school, five years by September 30; and~~

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## ~~5-27 for balanced mixed age groupings.~~

~~J. Each school-age child shall be assigned to a staff member or team of staff members in which each staff member is assigned no more than 18 children or each team of staff members are assigned no more than 36 children. Each staff shall assume the role, responsibility and identity of primary guide and caregiver for his assigned children. Centers shall establish a means to promote timely and appropriate communication between primary caregivers and staff members who provide guidance and support to the children during activities supervised by the latter staff members.~~

~~Notes: Subsections I and J of this section do not prohibit larger numbers of children being together when groups of children join for collective activities. Centers using an open classroom approach may submit for approval a plan to segment the space into suitable areas for defined groups of children or request a variance to this standard. ]~~

## PART VI. PROGRAMS.

### 22 VAC 15-30-451. Daily activities.

A. The variety of daily activities for all age groups shall be age and stage appropriate and provide opportunities for teacher-directed, self-directed, and self-chosen tasks and activities; a balance of active and quiet activities; individual and group activities; and curiosity and exploration.

Exception: Specialty camps do not need to provide opportunities for self-chosen tasks and curiosity and exploration.

B. For a child who cannot move without help, staff shall offer to change the places and position of the child at least every 30 minutes or more frequently depending on the child's individual needs.

C. Children shall be allowed to sleep or rest as individually needed.

*D. For a child in a therapeutic child day program, daily activities shall be in accordance [to with] the program's individual plan for such child.*

### 22 VAC 15-30-461. Daily activities for infants.

There shall be a flexible daily schedule for infants based on their individual needs. During the day, infants shall be provided with:

#### 1. Sleep as needed.

a. When an infant is placed in his crib, he shall be placed on his back (supine).

[ b. ] When an infant is able to easily turn over from the back (supine) to the belly (prone) position and he is placed in his crib, he shall still be put on his back (supine) but allowed to adopt whatever position he prefers. This applies unless otherwise directed by the infant's physician in writing.

[ c. ~~However,~~ ] If the side position is used, caregivers shall bring the dependent arm forward to lessen the likelihood of the infant rolling into a belly (prone) position.

[ ~~b. d.~~ ] Resting or sleeping infants shall be individually checked every ~~30~~ 15-20 minutes.

[ ~~e. e.~~ ] An infant who falls asleep in a play space ~~not his crib, cot, mat, or bed shall be moved to his own crib, cot, mat or bed if he is uncomfortable or unsafe specified in subdivision 5 a of this section may remain [ in that space ] if comfortable and safe.~~

2. Food as specified in 22 VAC 15-30-620 and 22 VAC 15-30-630.

3. *Outdoor time if weather and air quality allow [ based upon the Air Quality Color Code Chart as provided by the Department of Environmental Quality ].*

~~3.~~ 4. Comfort as needed.

4. 5. Play spaces.

a. Play spaces may include, but are not limited to, cribs, infant seats, play yards, exercise chairs or saucers (but not walkers), infant swings, high chairs, and floor space.

b. The variety of play spaces shall cumulatively offer:

(1) Room for extensive movement (rolling, crawling, or walking) and exploration;

(2) A diversity of sensory and perceptual experiences; and

(3) Equipment and toys that support large and small motor development.

c. Staff shall provide frequent opportunities for infants to creep, crawl, toddle and walk.

d. Infants shall be protected from older children.

e. Staff shall provide awake infants not playing on the floor or ground a change in play space at least every 30 minutes or more often as determined by the individual infant's needs.

f. Staff shall change the position of an awake infant playing on the floor or ground and the selection of toys available to the infant every 30 minutes or more often as determined by the individual infant's needs.

*g. Infants, who cannot turn themselves over and are awake, shall be placed on their stomachs a total of 30 minutes each day to facilitate upper body strength and to address misshapen head concerns.*

~~5- 6.~~ Stimulation and language development activities, including but not limited to staff reading, talking to, *showing pictures [ and to, ] naming objects [ for ], [ playing with and engaging in positive interactions (such as smiling, cuddling, [ and ] making eye contact [ , smiling and playing ) ]* with infants.

### 22 VAC 15-30-471. Daily activities for toddlers and preschoolers.

A. There shall be a posted daily schedule that allows for flexibility as children's needs require. The daily schedule need not apply on days occupied a majority of the time by a

field trip or other special event. The daily schedule shall include opportunities for:

1. Outdoor activity, weather *and air quality* allowing, for at least:
  - a. Fifteen minutes per day or session if the center operates up to three hours per day or session;
  - b. Thirty minutes per day or session if the center operates between three and five hours per day or session; or
  - c. One hour per day or session if the center operates more than five hours per day or session.

2. Sleep or rest.

- a. Centers operating five or more hours per day shall have a designated rest period for at least one hour but no more than two hours.

[ (1) ] Cribs, cots, beds, or mats shall be used.

[ (2) ] After the first 30 minutes, children not sleeping may engage in quiet activities.

- b. A child who falls asleep in a place other than his designated sleeping location ~~shall be moved to such location if uncomfortable or unsafe~~ may remain [ in that space ] if comfortable and safe.

- c. Sleeping toddlers shall be individually checked every 30 minutes.

3. Meals and snacks as specified in 22 VAC 15-30-620 and 22 VAC 15-30-630.

4. Small and large motor activities, language and communication experiences, sensory experiences, art or music activities, and play acting or social living.

B. Staff shall encourage language development by ~~personal~~ *having conversations giving with children that give them* time to initiate and respond, *by* labeling and describing objects and events, *having storytelling time* and *by* expanding ~~their~~ *language the children's vocabulary*.

## **22 VAC 15-30-490. Parental involvement.**

A. Before the child's first day of attending, parents shall be provided in writing the following:

1. The center's philosophy and any religious affiliation;
2. Operating information, including the hours and days of operation and holidays or other times closed, and the phone number where a message can be given to staff;
3. ~~Transportation safety policies and those for the arrival and departure of children. Such policies shall include procedures for picking up children after closing, for when a child is not picked up, for release of children only to those who have been authorized in writing, and street safety~~ The center's transportation policy;
4. *The center's policies for the arrival and departure of children [ , ] including procedures for verifying that only [ authorized ] persons [ authorized by the parent ] are*

*allowed to pick up the child, picking up children after closing, [ for ] when a child is not picked up for emergency situations including but not limited to inclement weather or natural disasters [ , and for release of children only to those who have been authorized in writing ];*

4. 5. The center's policy regarding any medication or medical procedures that will be given;

6. *The center's policy regarding application of:*

- a. *Sunscreen;*
- b. *Diaper ointment or cream; and*
- c. *Insect repellent.*

~~5.~~ 7. Description of established lines of authority for staff;

~~6.~~ 8. Policy for ~~paid staff to report~~ *reporting* suspected child abuse as required by § 63.2-1509 of the Code of Virginia;

9. *The custodial parent's right to be admitted to the center as required by § 63.2-1813 of the Code of Virginia;*

~~7.~~ 10. Policy for communicating an emergency situation with parents;

~~8.~~ 11. The appropriate general daily schedule for the age of the enrolling child;

~~9.~~ 12. Food policies;

~~10.~~ 13. Discipline policies including acceptable and unacceptable discipline measures; and

~~14.~~ 14. Termination policies.

B. Staff shall promptly inform parents when persistent behavioral problems are identified; such notification shall include any disciplinary steps taken in response.

C. A custodial parent shall be admitted to any child day program. Such right of admission shall apply only while the child is in the child day program (§ 63.2-1813 of the Code of Virginia).

D. The center shall provide opportunities for parental involvement in center activities.

E. Communication.

1. For each infant, the center shall post a daily record which can be easily accessed by both the parent and the staff working with the child. The record shall contain the following information:

- a. The amount of time the infant slept;
- b. The amount of food consumed and the time;
- c. A description and time of bowel movements; ~~and~~
- d. Developmental milestones; *and*
- e. *For infants, who are awake and cannot turn over by themselves, the amount of time spent on their stomachs.*

2. If asked by parents, staff shall provide feedback about daily activities, physical well-being, and developmental milestones.

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3. Parents shall be provided at least semiannually, ~~either orally or in writing~~, information on their child's development, behavior, adjustment, and needs ~~[ and staff shall request parent confirmation that the required information in the child's record is up to date and~~.

a. Staff shall] provide ~~[ an opportunity at least semiannual scheduled opportunities]~~ for parents to provide feedback on their children and the center's program.

[ b. Staff shall request at least annually parent confirmation that the required information in the child's record is up to date. ]

[ c. ] Such sharing of information shall be documented.

[ d. ] Short-term programs (as defined in 22 VAC 15-30-10) are exempt from this requirement.

4. Parents shall be informed of reasons for termination of services.

## 22 VAC 15-30-500. Equipment and materials.

A. Furnishings, equipment, and materials shall be of an appropriate size for the child using it.

B. Materials and equipment available shall be age and stage appropriate for the children and shall include an adequate supply as appropriate for each age group of arts and crafts materials, texture materials, construction materials, music and sound materials, books, social living equipment, and manipulative equipment.

C. Play equipment used by children shall meet the following requirements:

1. Openings above the ground or floor which allow a 3-1/2 inch by 6-1/4 inch rectangle to fit through shall also allow a nine-inch circle to fit through;

2. ~~Have closed~~-S-hooks where provided *may not be open more than the thickness of a penny*; and

3. Have no protrusions, sharp points, shearing points, or pinch points.

D. The *unenclosed* climbing portion of slides and climbing equipment used by toddlers and preschool children shall not be more than seven feet high ~~[ and must be located over resilient surfacing ]~~ where outdoors [ , ] and shall not be more than five feet high where indoors.

[ E. ] Centers may not install after ~~[ the effective date of the regulation June 1, 2005, ]~~ any slide or climbing equipment to be used by preschoolers or toddlers when the climbing portion of the equipment is more than six feet in height.

[ F. ] The climbing portions of indoor slides and climbing equipment over 18 inches shall not be over bare flooring.

[ G. ] The climbing portions of indoor slides and climbing equipment 36 inches or more shall be located over a resilient surface.

[ ~~E~~. H. ] Trampolines may not be used.

~~E~~. [ ~~F~~. I. ] If combs, toothbrushes, or other personal articles are used, they shall be individually assigned.

~~F~~. [ ~~G~~. J. ] Disposable products shall be used once and discarded.

~~G~~. [ ~~H~~. K. ] Provision shall be made for an individual place for each child's personal belongings.

~~H~~. [ ~~I~~. L. ] Infant walkers shall not be used.

~~I~~. [ ~~J~~. M. ] Play yards where used shall:

1. Meet the Juvenile Products Manufacturers Association (JPMA) and the American Society for Testing and Materials (ASTM) requirements ~~[ and shall retain the manufacturer's label documenting product compliance with current safety standards ]~~ at the time they were manufactured;

2. *Not be used after recalled*;

~~2~~. 3. Not use any pillows or filled comforters;

~~3~~. 4. Not be used for *the designated* sleeping areas;

4. 5. Not be occupied by more than one child; and

~~5~~. 6. Be ~~cleaned~~ *sanitized* each day of use ~~with an antibacterial agent~~ or more often as needed.

[ ~~K~~. N. ] Upon being informed that a product has been recalled ~~[ by the Consumer Product Safety Commission ]~~, center staff shall remove the item from the center.

~~J~~. [ ~~L~~. O. ] Where portable water coolers are used, they shall be of cleanable construction, maintained in a ~~sanitary~~ *cleaned* condition, kept securely closed and so designed that water may be withdrawn from the container only by water tap or faucet.

~~K~~. [ ~~M~~. P. ] Drinking water which is transported to camp sites shall be in closed containers.

~~L~~. [ ~~N~~. Q. ] Therapeutic child day programs and special needs child day programs serving children who use wheelchairs shall provide cushioned vinyl-covered floor mats for use when activities require children to be out of their wheelchairs.

## 22 VAC 15-30-510. Cribs, cots, rest mats, and beds.

A. Cribs, cots, rest mats or beds shall be provided for children during the designated rest period and not *be occupied* by more than one child at a time ~~shall occupy a crib, cot, rest mat, or bed~~.

B. Cribs, cots, rest mats, and beds shall be identified for use by a specific child.

C. Double decker cribs, cots, or beds, or other sleeping equipment when stacked shall not be permitted.

D. Occupied cribs, cots, rest mats, and beds shall be at least ~~[  $\geq$  2-1/2 ]~~ feet from any heat producing appliance.

E. There shall be at least 12 inches of space between occupied cots, beds, and rest mats.

Exception: Twelve inches of space are not required where cots, beds, or rest mats are located adjacent to a wall or a

~~screen divider~~ as long as one side is open at all times to allow for passage.

F. If rest mats are used, they shall have cushioning and be sanitized ~~between each use on all sides weekly [ or before use by another child ]~~.

G. Cribs shall be used for children under 12 months of age and for children over 12 months of age who are not developmentally ready to sleep on a cot or mat.

H. Cribs shall meet the following requirements:

1. They shall meet the Consumer Product Safety Commission Standards at the time they were ~~made~~ *manufactured*;

2. *They shall not have been recalled*;

~~2- 3.~~ There shall be no more than six centimeters or 2-3/8 inches of space between slats;

~~3- 4.~~ There shall be no more than one inch between the mattress and the crib; and

~~4- 5.~~ End panel cut-outs in cribs shall be of a size not to cause head entrapment.

I. Cribs shall be placed where objects outside the crib such as cords from blinds or curtains are not within reach of infants or toddlers.

J. There shall be at least:

1. Twelve inches of space between the sides and ends of occupied cribs except where they touch the wall; and

2. Thirty inches of space between service sides of occupied cribs and other furniture where that space is the walkway for staff to gain access to any occupied crib.

K. Crib sides shall be up and the fastenings secured when a child is in the crib, except when [ a ] staff [ *member* ] is giving the child immediate attention.

L. Pillows and filled comforters shall not be used by children under two years of age.

*M. Use of crib bumper pads shall be prohibited.*

*[ N. ] Toys or objects hung over an infant in a crib and crib gyms that are strung across the crib may not be used for infants over five months of age or infants who are able to push up on their hands and knees.*

## **22 VAC 15-30-520. Linens.**

A. Cribs, cots, *mats* and beds used by children *other than infants during the designated rest period or during evening and overnight care* shall have linens consisting of a top cover and a bottom cover or a one-piece covering which is open on three edges. *Cribs when being used by infants shall have a bottom cover.*

B. Linens shall be assigned for individual use.

C. Linens shall be clean ~~and sanitary~~ and ~~shall be~~ washed at least weekly.

[ 1. ] Crib sheets shall be ~~cleaned and sanitized~~ *clean and washed* daily.

[ 2. ] *When centers wash the linens, the water shall be above 140°F or the dryer shall heat the linens above 140°F as verified by the manufacturer or a sanitizer shall be used according to the manufacturer's instructions.*

D. Pillows when used shall be assigned for individual use and covered with pillow cases.

E. Mattresses when used shall be covered with a waterproof material which can be *cleaned and* sanitized.

## **22 VAC 15-30-540. Swimming and wading activities; staff and supervision.**

A. The staff-to-children ratios required by 22 VAC 15-30-440 E, G and H shall be maintained while children are participating in swimming or wading activities.

[ 1. ] Notwithstanding the staff-to-children ratios already indicated, at no time shall there be fewer than two staff members supervising the activity.

[ 2. ] The designated ~~water safety instructor or senior lifesaver~~ *certified lifeguard* shall not be counted in the staff-to-children ratios.

B. If a pool, lake, or other swimming area has a water depth of more than two feet, a ~~water safety instructor or senior lifesaver~~ *certified lifeguard* holding a current certificate shall be on duty supervising the children participating in swimming or wading activities at all times when one or more children are in the water.

[ C. ] The [ *lifeguard* ] certification shall be obtained from an organization such as, but not limited to, the American Red Cross, the YMCA, or the Boy Scouts.

## **22 VAC 15-30-550. Pools and equipment.**

A. When permanent swimming or wading pools are located on the premises of the center, the following shall apply:

1. The manufacturer's specifications for operating the pool shall be followed as well as any local ordinances and any Department of Health requirements for swimming pools;

2. Pools constructed, renovated, or remodeled after April 1, 1986, shall have a statement in writing of their inspection and approval from the local building official when such approval is required;

3. Outdoor swimming pools shall be enclosed by safety fences and gates which are in compliance with the applicable edition of the Virginia ~~Uniform Statewide Building Code USBC (13 VAC 5-61-10 et seq. 13 VAC 5-62)~~ and shall be kept locked when the pool is not in use;

4. Entrances to indoor swimming pools shall be locked when the pool is not in use; and

5. A whistle or other audible signaling device, a buoy or a lemon line, a reach pole, and a backboard shall be available at the swimming or wading site.

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B. If children are allowed to swim in a lake or other place other than a pool, safe swimming areas shall be clearly marked and there shall be appropriate water safety equipment.

C. Piers, floats, and platforms shall be in good repair and where used for diving, the minimum water depth shall be stated on the deck or planking.

D. If portable wading pools ~~without integral filter systems~~ are used, they shall be emptied ~~of dirty water after the use of each group of children, rinsed, and filled with clean water for each day's use and, or more frequently as necessary.~~

[ E. ] ~~Children who are not toilet trained may not use [ these portable wading ] pools.~~

[ ~~E. F. ] After each day's use, portable wading pools shall be emptied, sanitized, and stored in a position to keep them clean and dry.~~

## 22 VAC 15-30-560. Swimming and wading; general.

A. The center shall have emergency procedures and written safety rules for swimming or wading ~~or follow the posted rules of public pools~~ that are:

1. Posted in the swimming area when the pool is located on the premises of the center; and
2. Explained to children participating in swimming or wading activities.

B. The center shall maintain (i) written permission from the parent of each child who participates in swimming or wading, ~~which shall include and (ii) a statement from the parent advising of a child's swimming skills before the child is allowed in water above the child's shoulder height.~~

C. Staff shall have a system for accounting for all children in the water.

D. Outdoor swimming activities shall occur only during daylight hours unless underwater and deck lighting is provided.

~~E. Children who are not toilet trained shall not use portable wading pools.~~

## PART VII.

### SPECIAL CARE PROVISIONS AND EMERGENCIES.

## 22 VAC 15-30-570. Preventing the spread of disease.

~~A. If a child arrives at the center with the signs or symptoms listed in subsection B of this section, the child shall not be allowed to attend for that day.~~

~~B. A. Unless otherwise instructed by the child's health care provider, that child shall be excluded. A child shall not be allowed to attend the center for the day if he has:~~

1. ~~If he has~~ A temperature over ~~100°F~~ 101 °F;
2. ~~If he has~~ Recurrent vomiting or diarrhea; or
3. ~~As recommended in the Virginia Department of Health's current A communicable disease chart.~~

~~C. B. If a child needs to be excluded according to subsection B A of this section, the following shall apply:~~

1. Arrangements shall be made for the child to leave the center as soon as possible after the signs or symptoms are noticed; and
2. The child shall remain in the designated quiet area until leaving the center.

~~D. C. When a child children at the center has have been exposed to a communicable disease [ listed in the Department of Health's current communicable disease chart ], the parent parents shall be informed notified within 24 hours or the next business day of the [ center being center's having been ] informed unless forbidden by law [ , ] except for life threatening diseases, which must be reported [ within 24 hours to parents immediately ].~~

[ D. ] ~~The center shall consult the local department of health if there is a question about the communicability of a disease.~~

[ ~~D. E. ] When any surface has been contaminated with body fluids, it shall be cleaned and sanitized.~~

## 22 VAC 15-30-575. Hand washing and toileting procedures.

A. Hand washing.

1. Children's hands shall be washed with soap and ~~running~~ water or disposable wipes before and after eating meals or snacks;.

[ 2. ] ~~Children's hands shall be washed with soap and running water after toileting; and after any contact with body fluids blood, feces or urine.~~

[ ~~2. 3. ] Staff shall wash their hands with soap or germicidal cleansing agent and water and running water before and after helping a child use the toilet or a diaper change, after the staff member uses the toilet, after any contact with body fluids, and before feeding or helping children with feeding.~~

[ 4. ] ~~Exception: If running water is not available on [ field trips or playgrounds ], a germicidal cleansing agent administered per manufacturer's instruction may be used.~~

B. Diapering; soiled clothing.

1. The diapering area shall ~~allow for sight and sound supervision of other children in the classroom or be accessible and within the building used by children if the required staff to children ratios are maintained while children are being diapered.~~

[ 2. ] ~~There shall be sight and sound supervision for all children when a child is being diapered.~~

[ ~~2. 3. ] The diapering area shall be provided with the following:~~

- a. A sink with running warm water not to exceed 120°F;
- b. Soap ~~or germicidal cleaning agent~~, disposable towels and single use gloves such as surgical or examination gloves;

c. A nonabsorbent surface for diapering ~~which, for or changing shall be used. For~~ children younger than three years, ~~this surface shall be a changing table or countertop designated for changing;~~

d. The appropriate disposal container as required by subdivision 5 of this subsection; and

e. A leakproof covered receptacle for soiled linens.

~~[ 3. 4. ] When a child's clothing or diaper becomes wet or soiled, it shall be changed immediately. The child's soiled area shall be thoroughly cleaned with a disposable wipe or sanitized washcloth for each child the child shall be cleaned and changed immediately.~~

[ 4. 5. ] Disposable diapers shall be used unless the child's skin reacts adversely to disposable diapers.

[ 5. 6. ] Disposable diapers shall be disposed in a leakproof or plastic-lined storage system that is ~~not hand~~ ~~either foot-operated or used in such a way that~~ [ neither ] the staff member's hand [ ~~or nor~~ ] the soiled diaper [ ~~does not touch~~ ] an exterior surface of the storage system during disposal.

[ 7. ] When cloth diapers are used, a separate leakproof storage system ~~that is not hand-operated as specified in this subdivision~~ shall be used.

[ 6. 8. ] The diapering surface shall ~~only~~ be used ~~only~~ for diapering or cleaning children, and it shall be ~~washed~~ cleaned with soap and ~~warm~~ at least room temperature water ~~or a germicidal cleansing agent~~ and sanitized after each use. Tables used for children's activities or meals shall not be used for changing diapers.

[ Exception: Individual disposable barriers may be used between each diaper change. If the changing surface becomes soiled, the surface shall be cleaned and sanitized before another child is diapered. ]

[ 7. 9. ] Staff shall ensure the immediate safety of a child during diapering.

C. Toilet training. For every 10 children in the process of being toilet trained, there shall be at least one toilet chair or one child-sized toilet, or at least one adult sized toilet with a platform or steps and adapter seat.

[ 1. ] The location of these items shall allow for sight and sound supervision of children in the classroom if necessary for the required staff-to-children ratios to be maintained.

[ 2. ] Toilet chairs shall be emptied promptly and ~~cleaned~~ and sanitized after each use.

## 22 VAC 15-30-580. Medication.

A. Prescription and nonprescription medication shall be given to a child [ : ]

[ 1. ] According to the center's written medication policies [ and ; ]

[ 2. ] Only with written authorization from the parent [ ; ] and

[ 3. ] Administered by the staff member trained in accordance with 22 VAC 15-30-310 D.

B. The center's procedures for administering medication shall include:

1. Include any general restrictions of the center.

2. Be consistent with the manufacturer's instructions for age, duration and dosage.

~~2.~~ 3. Include duration of the parent's authorization for medication, provided that it shall expire or be renewed after 10 work days. Long-term prescription drug use ~~and over-the-counter medication~~ may be allowed with written authorization from the child's physician and parent.

~~3.~~ 4. Methods to prevent use of outdated medication.

C. The medication authorization shall be available to staff during the entire time it is effective.

D. Medication shall be labeled with the child's name, the name of the medication, the dosage amount, and the time or times to be given.

E. Medication shall be in the original container with the prescription label or direction label attached.

F. When needed, medication shall be refrigerated.

[ G. ] When medication is stored in a refrigerator used for food, the medications shall be stored together in a container or in a clearly defined area away from food.

~~[ G. H. ]~~ Medication, ~~except for those prescriptions designated otherwise by written physician's order~~, including refrigerated medication and staff's personal medication, shall be kept in a locked place using a safe locking method that prevents access by children.

[ I. ] If a key is used, the key shall not be accessible to the children.

~~[ H. J. ]~~ Centers shall keep a record of medication given children [ , ] which shall include the following:

1. Child to whom medication was administered;

2. Amount and type of medication administered to the child;

3. The day and time the medication was administered to the child;

4. Staff member administering the medication;

5. Any adverse reactions; and

6. Any medication error.

~~[ K. ]~~ Staff shall inform parents immediately of any adverse reactions to medication administered and any medication error.

~~[ J. L. ] Medication shall be returned to the parent as soon as the medication is no longer being administered. When an authorization for medication expires, the parent shall be notified that the medication needs to be picked up [ within 14 days or the parent must renew the authorization. Medications that are not picked up by the parent within 14 days will be~~

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disposed of by the center by either dissolving the medication down the sink or flushing it down the toilet ].

## **22 VAC 15-30-585. Over-the-counter skin products.**

[ A. All nonprescription drugs and over-the-counter skin products shall be used in accordance with the manufacturer's recommendations. Nonprescription drugs and over-the-counter skin products shall not be kept or used beyond the expiration date of the product. ]

[ ~~A. B.~~ ] If sunscreen is used, the following requirements shall be met:

1. Written parent authorization noting any known adverse reactions shall be obtained;
2. Sunscreen shall be in the original container and labeled with the child's name;
3. Sunscreen does not need to be kept locked but shall be inaccessible to children under five years of age or those children in a therapeutic child day program or special needs child day program; [ ~~and~~ ]
4. Any center-kept sunscreen shall be hypo-allergenic and have a minimum SPF of 15 [ - ; ]
- [ 5. Staff members without medication administration training may apply sunscreen, unless it is prescription sunscreen, in which case the storing and application of sunscreen must meet medication-related requirements; and
6. Children nine years of age and older may administer their own sunscreen if supervised. ]

[ ~~B. C.~~ ] If diaper ointment or cream is used, the following requirements shall be met:

1. Written parent authorization noting any known adverse reactions shall be obtained;
2. These products shall be in the original container and labeled with the child's name;
3. These products do not need to be kept locked but shall be inaccessible to children; [ ~~and~~ ]
4. A record shall be kept that includes the child's name, date of use, frequency of application and any adverse reactions [ ; and
5. Staff members without medication administration training may apply diaper ointment, unless it is prescription diaper ointment, in which case the storing and application of diaper ointment must meet medication-related requirements ].

[ ~~C. D.~~ ] If insect repellent is used, the following requirements shall be met:

1. Written parent authorization noting any known adverse reactions shall be obtained;
2. Insect repellent shall be in the original container and labeled with the child's name;

3. Insect repellent does not need to be kept locked but shall be inaccessible to children;

4. A record shall be kept that includes the child's name, date of use, frequency of application and any adverse reactions; [ ~~and~~ ]

5. Manufacturer's instructions for age, duration and dosage shall be followed [ ; and

6. Staff members without medication administration training may apply insect repellent, unless it is prescription insect repellent, in which case the storing and application of insect repellent must meet medication-related requirements ].

## **22 VAC 15-30-590. First aid training, cardiopulmonary resuscitation (CPR) and rescue breathing.**

A. There shall be at least one staff member trained in first aid, cardiopulmonary resuscitation, and rescue breathing as appropriate to the age of the children in care who is on the premises during the center's hours of operation and also one person on field trips and wherever children are in care.

[ 1. ] This person shall be available to children [ ; ] and meet one of the following qualifications: 1. Has a

[ 2. This person shall ] have current certification by the American Red Cross, American Heart Association, National Safety Council, or other designated program approved by the Department of Social Services; ~~or.~~

~~2. Is a R.N. or L.P.N. with a current license from the Board of Nursing.~~

B. Primitive camps shall have a staff member on the premises during the hours of operation who has successfully completed at least current certification in first responder training within the past three years.

## **22 VAC 15-30-600. First aid and emergency supplies.**

A. A first aid kit shall be:

1. On each floor of each building used by children;
2. Accessible to outdoor play areas;
3. On field trips; and
4. Wherever children are in care.

B. Each first aid kit shall be easily accessible to staff but not to children.

~~B. C.~~ The required first aid kits shall include at a minimum:

1. Scissors;
2. Tweezers;
3. Gauze pads;
4. Adhesive tape;
5. Band-aids, assorted types;
6. An antiseptic cleansing solution [ /pads ];
7. Thermometer;
8. Triangular bandages;



9. Single use gloves such as surgical or examination gloves; and

10. The first aid instructional manual.

~~C. Each first aid kit shall be stored so that it is not accessible to children but is easily accessible to staff.~~

D. The following emergency supplies shall be required at the center and be available on field trips:

1. ~~[ Syrup of ipecac or and ]~~ Activated charcoal preparation (to be used only on the ~~advice~~ direction of a physician or the [ center's local ] poison control center); and

2. An ice pack or cooling agent.

E. The following *nonmedical* emergency supplies shall be required:

1. A One working, battery-operated flashlight on each floor of each building that is used by children; and

2. One working, battery-operated radio in each building used by children and any camp location without a building.

## 22 VAC 15-30-610. Procedures for emergencies.

A. The center shall have an emergency ~~evacuation~~ preparedness plan that addresses staff responsibility and facility readiness with respect to: emergency evacuation and shelter-in-place. The plan [ , which ] shall be developed in consultation with local or state authorities [ ~~that~~ , ] addresses the most likely to occur emergency scenario or scenarios [ { , including but not limited to } natural disaster, chemical spills, intruder, [ and ] terrorism [ , etc. ] specific to the locality.

B. The emergency preparedness plan shall contain procedural components for:

1. Sounding of ~~fire~~ alarms and (intruder, shelter-in-place such as for tornado, or chemical hazard);

2. Emergency communication to include:

a. Establishment of center emergency officer and back-up officer to include 24-hour contact telephone number for each;

b. Notification of local authorities (fire and rescue, law enforcement, emergency medical services, poison control, health department, etc.), parents, and local media; and

c. Availability and primary use of communication tools;

2. 3. Evacuation ~~procedures~~ including to include:

a. Assembly points, head counts, primary and secondary means of egress, and ~~checking to ensure~~ complete evacuation of the buildings;

b. Securing of essential documents (sign-in record, parent contact information, etc.) and special healthcare supplies to be carried off-site on immediate notice; and

c. Method of communication after the evacuation;

4. Shelter-in-place to include:

a. Scenario applicability, inside assembly points, head counts, primary and secondary means of access [ and egress ];

b. Securing essential documents (sign-in records, parent contact information, etc.) and special health supplies to be carried into the designated assembly points; and

c. Method of communication after the shelter-in-place;

3. 5. ~~Fire~~ Facility containment procedures, (e.g., closing of fire doors or other barriers) and shelter-in-place scenario (e.g., intruders, tornado, or chemical spills); and

6. Staff training requirement, drill frequency, and plan review and update; and

4. 7. Other special procedures developed with local authorities.

~~B. C.~~ Emergency evacuation and shelter-in-place procedures/maps shall be posted in a location conspicuous to staff and children on each floor of each building.

~~C. D.~~ The center shall implement ~~these emergency evacuation procedures through~~ a monthly practice drills evacuation drill and a minimum of two shelter-in-place practice drills per year for the most likely to occur [ ~~scenario scenarios~~ ].

E. The center shall maintain a record of the dates of the ~~monthly~~ practice drills for one year. For centers offering multiple shifts, the ~~evacuation procedures simulated drills~~ shall be divided evenly among the various shifts.

~~D. F.~~ A generic emergency number such as 911 shall be posted in a conspicuous place near each telephone. If a generic number is not available, the following numbers shall be posted near each phone: A 911 or local dial number for police, fire and emergency medical services and the number of the regional poison control center shall be posted in a visible place at each telephone.

1. A physician or hospital;

2. An ambulance or rescue squad service;

3. The local fire department; and

4. The local police department.

~~E.~~ The number of a regional poison control center shall be posted in a conspicuous place near each phone.

~~F.~~ If an ambulance service is not readily available within 10 to 15 minutes, other transportation, such as a private automobile, shall be available in case of emergency.

G. Each camp location shall have an emergency preparedness plan and warning system.

H. The center shall prepare a [ ~~sheet~~ document ] containing local emergency contact information, potential shelters, hospitals, evacuation routes, etc., [ ~~of sites that pertain to each site~~ ] frequently visited or of routes frequently driven by center staff for center business (such as field trips, pick-up/drop off of children to or from schools, etc.). [ This

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*document must be kept in vehicles that centers use to transport children to and from the center. ]*

*I. Parents shall be informed of the center's emergency preparedness plan.*

*J. Based on local authorities and documented normal ambulance operation, if an ambulance service is not readily accessible within 10 to 15 minutes, other transportation shall be available for use in case of emergency.*

~~G. K.~~ The center or other appropriate official shall notify the parent immediately if a child is lost, ~~has a serious injury, needs emergency medical care, or dies~~ *requires emergency medical treatment or sustains a serious injury.*

[ L. ] The center shall notify the parent by the end of the day of any known ~~significant~~ minor injuries.

[ M. ] The center shall maintain a written record of children's serious and ~~significant~~ minor injuries in which entries are made the day of occurrence. The record shall include the following:

1. Date and time of injury;
2. Name of injured child;
3. Type and circumstance of the injury;
4. Staff present and treatment;
5. *Date and time* when parents were notified; ~~and~~
6. Any future action to prevent recurrence of the injury-;
7. *Staff and parent signatures or two staff signatures; and*
8. *Documentation on how parent was notified.*

~~H. The camp shall have a warning system. Staff and campers shall be trained in this warning system.~~

## PART VIII. SPECIAL SERVICES.

### 22 VAC 15-30-620. Nutrition and food services.

A. Centers shall schedule appropriate times for snacks or meals, or both, based on the hours of operation and time of the day [ ; ( ) e.g., a center open only for after school care shall schedule an afternoon snack; a center open from 7 a.m. to 1 p.m. shall schedule a morning snack and midday meal [ ] ].

B. The center shall ensure that children arriving from a half-day, morning program who have not yet eaten lunch receive a lunch.

C. The center shall schedule snacks or meals so there is a period of at least 1-1/2 hours but no more than three hours between each meal or snack unless there is a scheduled rest or sleep period for children between the meals and snacks.

D. Drinking water or other beverage not containing caffeine shall be offered at regular intervals to nonverbal children.

E. In environments of 80°F or above, attention shall be given to the fluid needs of children at regular intervals. Children in

such environments shall be encouraged to drink fluids as outlined in subsection D of this section.

F. When centers choose to provide meals or snacks, the following shall apply:

1. Centers shall follow the most recent, *age-appropriate* nutritional requirements of a recognized authority such as the Child and Adult Care Food Program of the United States Department of Agriculture (USDA).

~~2. Children shall be allowed second helpings of food listed in the USDA's child and adult care meal patterns.~~

~~2.~~ 3. Centers offering both meals and snacks shall serve a variety of nutritious foods and shall serve at least three sources of vitamin A and at least three sources of vitamin C on various days each week.

~~4. Children three years of age or younger may not be offered foods that are considered to be potential choking hazards.~~

~~3.~~ 5. A menu listing foods to be served for meals and snacks during the current one-week period shall:

- a. Be dated;
- b. Be posted in a location conspicuous to parents or given to parents;
- c. List any substituted food; and
- d. Be kept on file for one week at the center.

~~4.~~ 6. Powdered milk shall not be used except for cooking.

G. When food is brought from home, the following shall apply:

1. The food container shall be *sealed and clearly dated and* labeled in a way that identifies the owner;

2. The center shall have extra food or shall have provisions to obtain food to serve to children so they can have an appropriate snack or meal if they forget to bring food from home, bring an inadequate meal or snack, or bring perishable food; and

3. Unused portions of *opened* food shall be discarded by the end of the day or returned to the parent.

H. If a catering service is used, it shall be approved by the local health department.

I. Food shall be prepared, *stored, and transported* in a clean and sanitary manner.

J. Contaminated or spoiled food shall not be served to children.

K. *Tables and high chair trays shall be:*

1. *Sanitized [ immediately ] before [ and after each ] use for feeding; and*
2. ~~[ Washed after used for feeding ]~~ *Cleaned at least daily* ].

~~K.~~ L. Children shall be encouraged to feed themselves.

[ M. ] Staff shall sit with children during meal times.

[ N. ] No child shall be allowed to drink or eat while walking around.

## 22 VAC 15-30-630. Special feeding needs.

A. High chairs, infant carrier seats, or feeding tables shall be used for children under 12 months who are not held while being fed.

[ 1. ] Children using infant seats or high chairs shall be supervised during snacks and meals.

[ 2. ] When a child is placed in an infant seat or high chair, the protective belt shall be fastened securely.

B. Bottle fed infants who cannot hold their own bottles shall be held when fed. Bottles shall not be propped *or used while the child is in his designated sleeping location*.

C. The record of each child on formula shall contain:

1. The brand of formula; and
2. The child's feeding schedule.

D. Infants shall be fed on demand or in accordance with parental instructions.

E. Prepared infant formula shall be refrigerated, *dated* and labeled with the child's name.

[ F. ] Heated formula and baby food shall be stirred or shaken and tested for temperature before serving to children.

[ G. ] *Milk, formula or breast milk [ ~~may shall~~ ] not be heated or warmed directly in a microwave. Note: Water for warming milk, formula, or breast milk may be heated in a microwave.*

[ ~~F. Formula, bottled breast milk, and~~ H. ] Prepared baby food not consumed *during that feeding* by an infant may be used by that same infant later in the same day, [ *if provided that the food is not served out of the baby jar and is* ] dated and stored in the refrigerator; otherwise, it shall be discarded or returned to the parent at the end of the day. *Formula or breast milk shall not remain unrefrigerated for more than [ ~~one hour~~ two hours and may not be reheated ] .*

[ ~~G. I.~~ ] A one-day's emergency supply of disposable bottles, nipples, and commercial formulas appropriate for the children in care shall be maintained at the center.

[ ~~H. J.~~ ] Breastfeeding shall be permitted.

[ ~~I. K.~~ ] Staff shall feed semisolid food with a spoon unless written instructions from a physician *or physician's designee* state differently.

[ ~~J. L.~~ ] For therapeutic child day programs and special needs child day programs, the consistency of food shall be appropriate to a child's special feeding needs. Necessary and adaptive feeding equipment and feeding techniques shall be used for children with special feeding needs.

## 22 VAC 15-30-640. Transportation and field trips.

A. If the center provides transportation, the center shall be responsible from the time the child boards the vehicle until returned to the parents or person designated by the parent.

B. Any vehicle used by the center for the transportation of children shall meet the following requirements:

1. The vehicle shall be manufactured for the purpose of transporting people seated in an enclosed area;
2. The vehicle's seats shall be attached to the floor;
3. The vehicle shall be insured with at least the minimum limits established by Virginia state statutes;
4. The vehicle shall meet the safety standards set by the Department of Motor Vehicles and shall be kept in satisfactory condition to assure the safety of children; and
5. If volunteers supply personal vehicles, the center is responsible for ensuring that the requirements of this subsection are met.

C. The center shall ensure that during transportation of children:

1. Virginia state statutes about safety belts and child restraints are followed [ *and stated maximum number of passengers in a given vehicle shall not be exceeded* ];
2. The children remain seated and each child's arms, legs, and head remain inside the vehicle;
3. Doors are closed properly and locked unless locks were not installed by the manufacturer of the vehicle;
4. At least one staff member or the driver always ~~remain~~ *remains* in the vehicle when children are present;
5. The following information is in transportation vehicles:
  - a. Emergency numbers as specified in 22 VAC 15-30-610 ~~D F~~ and ~~E H~~;
  - b. The center's name, address, and phone number; and
  - c. A list of the names of the children being transported.

D. When entering and leaving vehicles, children shall enter and leave the vehicle from the curb side of the vehicle or in a protected parking area or driveway.

E. Children shall cross streets at corners or crosswalks or other designated safe crossing point if no corner or crosswalk is available.

F. The staff-to-children ratios of 22 VAC 15-30-440 E, G and H shall be followed on all field trips. The staff-to-children ratios need not be followed during transportation of [ *school-age* ] children to and from the center [ *as long as there is.* ] *One staff member or adult [ is necessary ] in addition to the driver when 16 or more [ preschool or younger ] children are being transported in the vehicle.*

G. The center shall make provisions for providing children on field trips with adequate food and water.

H. If perishable food is taken on field trips, the food shall be stored in insulated containers with ice packs to keep the food cold.

I. Before leaving on a field trip, a schedule of the trip's events and locations shall be posted and visible at the center site.

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J. There shall be a communication plan between center staff and staff who are transporting children or on a field trip.

*K. Staff shall verify that all children have been removed from the vehicle at the conclusion of any trip.*

~~K.~~ L. Parental permission for transportation and field trips shall be secured before the scheduled activity.

[ M. ] If a blanket permission is used instead of a separate written permission, the following shall apply:

1. Parents shall be notified of the field trip; and
2. Parents shall be given the opportunity to withdraw their children from the field trip.

## **22 VAC 15-30-650. Transportation for nonambulatory children.**

A. For therapeutic child day programs and special needs child day programs providing transportation, nonambulatory children shall be transported in a vehicle which is equipped with a ramp or hydraulic lift to allow entry and exit.

B. Wheelchairs shall be equipped with ~~seat belts~~ *restraining devices* and shall be securely fastened to the floor when used to seat children in a vehicle.

C. Arrangements of wheelchairs in a vehicle shall not impede access to exits.

D. For therapeutic child day programs and special needs child day programs, when the center is responsible for providing transportation, the center shall develop a plan based on the needs of the children in care to assure their safe supervision during on-loading, off-loading and transporting ~~and~~.

*E.]* When 16 or more children are being transported, there shall be at least one center aide or adult besides the driver, for each group of 16.

~~[ E. F. ]~~ For therapeutic child day programs and special needs child day programs, if a child has a known seizure disorder or neurological, genetic or physiological disability causing increased medical risk and that child is being transported, one center aide or adult who is not the driver and who is trained in CPR shall be present in the vehicle.

## **22 VAC 15-30-660. Animals and pets.**

A. Animals that are kept on the premises of the center shall be vaccinated, if applicable, against diseases which present a hazard to the health *or safety* of children.

B. Animals which are, or are suspected of being, ill or infested with external lice, fleas and ticks or internal worms shall be removed from contact with children.

C. If a child is bitten by an animal, an attempt shall be made to confine the animal for observation or laboratory analysis for evidence of rabies.

[ D. ] The site of the bite shall be washed with soap and water immediately, and the child's physician or local health department shall be contacted as soon as possible for medical advice.

[ E. ] The center shall report the animal bite incident to the local health department.

~~[ D. F. ]~~ Manure shall be removed from barns, stables and corrals at least once a day and stored and disposed of in a manner to prevent the breeding of flies.

## **22 VAC 15-30-670. Evening and overnight care.**

A. For evening care, beds with mattresses or cots with at least one inch of dense padding shall be used by children who sleep longer than two hours and are not required to sleep in cribs.

Exception: Camps providing evening ~~or overnight~~ care to ~~school age children~~ on an occasional basis are not required to meet the requirements of this subsection if sleeping bags or cots are used.

B. For overnight care, beds with mattresses or cots with at least two inches of dense padding shall be used by children who are not required to sleep in cribs.

Exception: Camps providing ~~evening or~~ overnight care to ~~school age children~~ on an occasional basis are not required to meet the requirements of this subsection if sleeping bags or cots are used.

C. For overnight care which occurs for a child on a weekly or more frequent basis, beds with mattresses shall be used.

D. In addition to 22 VAC 15-30-520 about linens, bedding appropriate to the temperature and other conditions of the rest area shall be provided.

E. For evening and overnight care, separate sleeping areas shall be provided for children of the opposite sex eight years of age or older.

F. If sleeping bags are used, 22 VAC 15-30-510 A through E about rest furnishings shall also apply to the use of sleeping bags.

G. Camps may use bunk beds if children are at least eight years of age.

H. In centers providing overnight care, an operational tub or shower with heated and cold water shall be provided.

Exception: Primitive camps are not required to have a tub or shower.

I. When bath towels are used, they shall be assigned for individual use.

J. Activities for children in evening or overnight care shall include, as time allows, age-appropriate activities as described in 22 VAC 15-30-451 through 22 VAC 15-30-481.

K. Quiet activities ~~and experiences~~ shall be available immediately before bedtime.

L. For children receiving evening or overnight care, the provider shall offer an evening snack.

<p><b>NOTICE:</b> The forms used in administering 22 VAC 15-30, Standards for Licensed Child Day Centers, are not being published; however, the name of each form is listed below.</p>
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The forms are available for public inspection at the office of the Department of Social Services, 7 North 8th Street, Richmond, Virginia, or at the office of the Registrar of Regulations, General Assembly Building, 910 Capitol Street, 2nd Floor, Richmond, Virginia.

## FORMS

Initial Application for a License to Operate a Child Day Center, ~~032-05-512/14~~ 032-05-512/12 (~~rev. 10/02~~).

Renewal Application for a License to Operate a Child Day Center, ~~032-05-225/10~~ 032-05-225/11 (~~rev. 10/02~~).

## DOCUMENTS INCORPORATED BY REFERENCE

~~Communicable Disease Reference Chart for School Personnel, Virginia Department of Health, rev. 2/02.~~

~~Standard Consumer Safety Specification for Play Yards, American Society for Testing and Materials, ASTM designation: F 406-89, January 1990.~~

*F406-02 ASTM Standard Consumer Safety Specification for Non-Full-Size Baby Cribs/Play Yards [ , October 2003 ].*

*F1292-99 ASTM Standard Specification for Impact Attenuation of Surface Systems Under and Around Playground Equipment [ , August 10, 1999 ].*

[ "Selecting Playground Surface Materials: Guidelines for Selecting the Best Surface Material for Your Playground," National Program for Playground Safety, University of Northern Iowa, February 2004. ]

[ Air Quality Color Code Chart, Virginia Department of Environmental Quality , April 2004. ]

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